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Turning the light on: the negotiation and  
representation of condom use

Laura Harvey

BSc (Hons) International Relations and History  
MSc Gender

Thesis presented for the degree of Doctorate in Philosophy

Department of Psychology in the Social Sciences



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## YOUR ACCEPTANCE

### 1 Student details

Your full name: Laura Harvey

Personal identifier (PI): Y7784694

Affiliated Research Centre (ARC) (if applicable):

Department: Psychology, Faculty of Social Sciences

Thesis title: Turning the light on: The negotiation and representation of condom use

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## Abstract

This thesis examines how a diverse group of participants in England make sense of condom use, exploring how talk about condoms relates to the operation of and resistance to social inequalities, and examining how public health discourse is taken up and reformulated in everyday talk about sex. It takes a feminist, discursive rhetorical approach, combining this with an exploration of how particular discourses about condom use can be understood to be ideological. The thesis draws on data from surveys, interviews and a media case study of *The Jeremy Kyle Show*: situating a fine-grained analysis of the discursive construction of condom use within the context of a broader understanding of the operation of power in the everyday. In addition, the work develops the use of private diaries as a tool for interview research about intimate life.

The research explores how talk about condom use can work to construct subjects, developing the concept 'safer sexual subjectivity'. The discursive construction of 'safer subjects' was found to work in complex ways with existing social categories such as 'race', class and gender, with particular subjects marked as more 'risky' than others. Talk about condom use reproduced, resisted and reworked norms of gender, sex and relationships. New norms of gendered responsibility positioned skilful condom use as a strategy of self-care and regulation of neoliberal sexual subjectivity. Public health discourse was taken up and reworked by participants, producing new forms of intimacy and desire.

The thesis concludes that the negotiation of condom use is not simply an in the moment activity that happens during sex, or a 'healthy choice' made by rational actors. Talk about condom use serves rhetorical purposes in positioning people and communities, categorising relationships and developing norms about sexual practices and gender identities.



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# Chapter 1: Introduction

Three decades have passed since the term 'AIDS' was coined. Since then, there have been huge shifts in medicine, technology, economics, culture and politics globally. Neoliberal ideology, which was in its early years in UK government policy at that time, now arguably occupies a position of 'common sense' not only in the public sphere, but in the governing of intimate life. Research about sexual practice from a wide range of disciplines has played a role in the development of education, policy, campaigns and media representations of sexual health. It is in this social and historical context that this thesis explores participants' stories about condom use. Drawing on data from 212 surveys, 46 interviews with 26 participants and a case study of an episode of *The Jeremy Kyle Show*, my analysis shines light on how a diverse sample of participants aged 16-45 from London and Oldham make sense of their sexual experiences, exploring how talk about condoms relates to the operation of and resistance to social inequalities, and examining how public health discourse is taken up and reformulated in everyday talk about sex. At its core, the thesis addresses the following research questions:

- What are participants' experiences of using condoms?
- How do participants make sense of media representations of sex and condoms?
- How do participants relate such representations about condoms to their own sexual experiences?

The thesis that follows is concerned not only with the 'moment' of condom use, but how the social construction of condoms produces particular subjects, relationships and communities. It therefore attends to questions about the intersectionality of gender, 'race', social class and sexuality in accounts of condom use, and looks both to sites where

inequalities are maintained and naturalised, and to potential sites of change. In this chapter I will give a brief overview of the current political and social context of sexual health discourse in the UK, outline the parameters of the research, point to the central themes that will thread through the following chapters and finally give an overview of the structure of the thesis.

### ***History, policy and praxis: the context of the project***

Much of this thesis focuses on the detail of participants' accounts, with the analysis connecting that up to an understanding of the cultural and historical context in which people experience and talk about sex. While much can be learnt from combining research from across cultural and geographical boundaries, it is important to note that the kind of education people receive about sex, and the dominant discourses in policy, legislation and wider political discourse are different across both time and geographical location. For example, the position of the condom in the US varies between states, and the 'battles' surrounding sex education there take place in the context of political and religious divisions both locally and nationally, particularly in relation to the Christian right (Anijar, 2005). Of course such issues are not simply confined to geographical location: the debates on abstinence and abortion in the US have far-reaching implications for health providers working in NGOs across the world. However, the condom can be seen to adopt a relatively different position in the UK in comparison with the US for example, which relates in part to the specific trajectory of public health and sexuality in their respective national social and political histories. Such social conditions also have an impact on the material availability of condoms. For example, in the UK, condoms are available for free via NHS providers such as GPs, GUM clinics and youth sexual health services. Condoms are relatively expensive to buy in pharmacies and supermarkets, which was presented as an

issue for a number of participants in the interview and survey data. While many participants were aware that free condoms could be obtained from the NHS, these condoms were often positioned as less pleasant or uncomfortable to use.

Vitellone (2008) points to the change in sex education provision that occurred in the UK after the advent of AIDS. Condom use became framed as a public health issue, leading to a requirement for schools to teach young people about the risks of HIV and AIDS in 1991 (Vitellone, 2008, p.21). However, since then, sex education has been subject to considerable instability and controversy. School-based sex education is now delivered chiefly through Personal, Social, Health and Economic Education (PSHE). While there is government guidance on the topic, attempts to make PSHE a statutory requirement for primary and secondary schools failed just before the Coalition government came to power in 2010, and the Department for Education is currently conducting an internal review about support and provision for the delivery of PSHE (PSHE Association, 2012). The research participants who took part in this study talked about varied experiences of sex education. Some remember grave warnings about HIV, some only recall videos of people playing tennis naked and others gave accounts of the well-worn tale of learning to put a condom on a banana.

None of the participants in this project were still in compulsory education, but I would argue that guidelines for sex education are not just relevant for those who are in school. Controversies around both the content and very existence of sex education permeate the public sphere, producing categories that can be taken up in everyday discourse about sexuality. For example, Burrige (2004, p.330) argues that the discourse surrounding the introduction and eventual repeal of 'Section 28'<sup>1</sup> produced particular sexuality

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<sup>1</sup> Section 28 was an amendment to the Local Government Act 1988, which was intended to



classifications in which 'good homosexuals' who 'assimilated' into heteronormative society were constructed in opposition to 'dangerous queers'. The more recent discourse around the 'sexualisation of culture', which I discuss further in chapter two, has provoked intense policy scrutiny in particular surrounding young girls' sexuality. Briefly, the notion of 'sexualisation of culture' tends to refer to the idea that there is an increasing level of sexual representation in 'Western' societies, including the 'mainstreaming' of pornography and increasing availability of sexual information (Harvey and Gill, 2011). The UK in recent years has seen an intensified focus on the 'sexualisation of culture' in relation to children (usually specifically girls) in which particular objects, such as the 'Primark padded bra for girls' are evoked repeatedly in news reporting, campaigns and parliamentary debates (Buckingham et al., 2010; HC Deb (2010-1) Col 679). These debates not only form the foundations of educational policy, but produce particular 'truths' about gender, class, sexuality and 'race', such as the positioning of white, middle-class girls as the 'privileged subjects' (Gill, 2012, p.742) of the debate about 'sexualisation', and the construction of working class female sexuality as 'disgusting' and 'irresponsible' (Tyler, 2008a).

These debates are not confined to the corridors of power. There has been a recent resurgence of feminist activism in the UK arising from a broad spectrum of political perspectives, addressing diverse and sometimes conflicting issues such as the licensing of lap dancing clubs, beauty pageants, 'lads mags', sex workers rights, the impact of government cuts on women, climate change, equal pay, LGBT rights, abortion rights and so on. The widespread availability of online and mobile technologies have created new ways for activist discourse to be disseminated outside of mainstream media channels.

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prevent the 'promotion' of homosexuality as an 'acceptable' 'pretended family relationship' within schools (Crown Copyright, 1988). It was eventually repealed in 2003, after a failed attempt to repeal it in 2000.

including a growth in established feminist blogs, which I discuss in chapter eight. These shifting discourses around sexual rights and responsibilities form part of the backdrop of my doctoral research; not only in terms of the participants' stories, but my own experiences and position as both an academic and activist. As I outline in chapter three, this project stems from a feminist project to make sense of inequalities in the intimate sphere, and is motivated by a critical imperative not only to understand but to intervene in the production of discourse about sexuality.

### ***Condom use: some parameters***

Condom use is a messy topic to research, partly as a result of the political issues summarised above, but also because of its utility as an object. Condoms can be used for a range of sexual practices, including but not limited to vaginal and anal intercourse, activities using dildos and vibrators, fellatio and fingering. I left the definitions of condom use open for participants, wanting to be guided by their accounts as much as possible. As it was, participants generally limited their accounts of condom use to talking about vaginal and anal intercourse, usually in relation to the use of condoms on a penis, although one female participant talked about the use of a condom on a dildo for anal sex with her male partner. A number of participants mentioned that they had heard of using condoms for fellatio but most presented this as something they did not do, which reflects the findings of Hatherall et al's (2005) study of 'the choreography of condom use' in the UK. As such, the discussion in this thesis is limited to participants' discussion of condom use for anal and vaginal penetration.

Condoms can also be used for a range of reasons, such as protection against STIs, HIV and pregnancy; the reduction of mess; hygiene; comfort; and pleasure. The main reasons

participants discussed using condoms were for protection against pregnancy, STIs and HIV. These separate but intertwined issues complicate the condom's position in sexual health discourse; questions of fertility, infertility, health and disease surfaced in the data depending on the participant's reason for using condoms. The multiple uses of condoms meant that questions of contraception and infection prevention could become quite tangled in participants' accounts. For example, some female participants talked about the difficulties they faced in negotiating condom use if they switched to using a hormonal contraceptive, as this involved questions of infection and health which sometimes seemed trickier to navigate than the prevention of pregnancy.

The argument in this thesis explores discourses of 'safer sex'. The terms 'safe' and 'safer' sex are often used interchangeably in literature addressing condom use (see for example Galligan and Terry, 1993; Wilton, 1997; Warr, 2001; Holland et al., 2004). Wilton defines 'safe sex' as 'avoidance of sexual activities involving penetration of either vagina or anus with a penis' and 'safer sex' as 'using a condom during anal or vaginal penetration' (Wilton, 1997, p.12). Given that these were the main activities discussed by participants in relation to condom use, this is the definition of 'safer sex' that I will generally use throughout the thesis. However, in recent years, a range of additional harm reduction strategies have emerged, such as sexual health testing. While these do not constitute 'safer sex' in the sense of the definition above, they do orient towards similar notions of negotiated protection from risk. Therefore while I do not define these strategies as 'safer sex' in my analysis, they fall under my discussion of how participants constructed themselves as 'safer sexual subjects'. I decided at the start of this project to limit my analysis to condom use. However, an additional barrier method that can be used for protection against STIs and HIV during sex is the dental dam. While a number of participants mentioned that they had heard of dental dams, no-one specifically talked about negotiating their use. As such, I did not

incorporate dental dams further into my analysis, although their position in discourse about sexuality would certainly be an interesting area for further study.

### ***Understanding safer sexual subjectivity: key themes***

For some participants condoms were presented as a merely practical item – something that just needed to be used. However, condoms also appeared in participants' accounts as much more than that – as symbols of relationships, of identity, of political action, responsibility and the relationship to the self. I started the thesis expecting to examine the detail of participants' discursive strategies in negotiating condom use 'in the moment'. However, the data forced me to rethink what 'negotiation' might mean in relation to condoms. Therefore, in addition to examining participants' stories of 'in the moment' negotiation of condom use, this thesis also explores participants negotiating changing norms of gender and sexuality; negotiating the construction of their own identities; negotiating pleasurable, challenging, painful and boring sex; and negotiating the demands of self-governance in a neoliberal society. One of the central thematic threads that runs through all empirical chapters concerns the construction of neoliberal sexual subjectivities. My analysis examines how discourse about condom use positions subjects in relation to social categories of gender, 'race', class and sexuality. I explore the historical context of neoliberal ideology in intimate life and analyse the role of public health discourse in the formation of sexual subjects and desires.

In order to explore these issues, this thesis develops the use of private diaries and semi-structured interviews as a sensitive, participatory and reflexive research method, combining discourse analysis of survey data and participant interviews with discursive analysis of a case study media text from *The Jeremy Kyle Show*, selected on the basis of

participant interviews. I have taken a feminist, 'eclectic' (Maynard, 1995; Wetherell, 1998) approach to the study of discourse, focusing in particular on discourses that could be understood to be *ideological*, an approach I outline in chapter three. My analysis explores how talk about condoms can sometimes be understood to produce *ideological effects*, in the sense of reinforcing or challenging particular structures of power and inequality. In exploring the structure of ideological discourse, I analyse three distinct but interrelated systems of meaning used by participants in talking about condom use, which I conceptualise as 'interpretative repertoires', drawing on Potter and Wetherell's (1987) discursive psychological approach. I label these repertoires 'care of the sexual self', 'risky subjects' and 'the moment'. The first three empirical chapters explore each of these repertoires separately, taking a fine-grained approach to participant data. The final two empirical chapters broaden out to examine the functioning of ideological discourse in participant accounts of media representations of sex and condom use, discursively examine the case study text alongside participant data, and explore how the repertoires were constructed in relation to each other in talk and text.

## ***Outline of the thesis***

In chapter two I provide an outline of the relevant existing bodies of scholarship that the thesis builds on and contributes to. I outline key literatures on the subject of the care of the self; public health and risk; the body; sexualities; sexual negotiations and condoms; and media, audience and sexual subjectivities. My thesis draws on scholarship from a range of disciplines, including work from social psychology, sociology, philosophy and cultural studies. Chapter two, along with chapter three, provides the theoretical foundations for the thesis, with the arguments in the empirical chapters that follow referring back to and developing the concepts outlined there. Chapter three focuses more specifically on the

feminist approach I have taken in the design, data collection, analysis and writing of this thesis. I argue there that condom use should be considered a political issue, related to questions of equality and social justice. I outline the rationale for conducting research using 'feminist methodology', exploring some of the dilemmas and contradictions involved in claiming that label. Chapter three also provides a thorough account of the key concepts of 'discourse' and 'ideology' that are at the centre of my analysis, making a case for their combined use in the pursuit of a feminist project that searches for the best tools to understand inequality (Maynard, 1995). Finally, I further outline the discursive and rhetorical concepts I have employed in my data analysis: the 'interpretative repertoire', 'ideological dilemma' and 'categorisation and particularisation'.

In chapter four I provide a practical account of the methods used to carry out the research. I discuss the design and composition of my sample, explore ethical considerations and outline the detail of how I carried out the research. This includes an explanation of the design and implementation of the survey, the purpose and use of the private diaries, how I conducted the interviews and how I selected and analysed the media case study. In addition I reflect on some of the challenges I faced in conducting the research and outline some of the limitations of the methods used.

Chapter five is the first empirical chapter in the thesis. In this chapter I analyse how participants drew on discourses of self-care, aspiration and self-development in making sense of their own and others' condom use. I build on the theoretical analysis from chapters two and three to introduce and begin to develop the concept of *safer sexual subjectification*, which I continue to work with throughout the remaining empirical chapters. I explore in particular the *gendered* dynamic of this repertoire, exploring the detail of participants' accounts to examine how men and women were positioned

differently by this discourse. Chapter five explores the position of condom use as 'common sense', setting the groundwork for the following empirical chapters in which justifications for *non* use of condoms come much more to the fore.

Chapter six examines strategies of categorisation that participants used to position themselves and other people as 'risky', 'at risk' or 'safe' when talking about condom use. I use a rhetorical approach to look at what this process of categorisation is *doing* in participants' accounts, and how this relates to the construction of subjectivities, communities and relationships. I situate my empirical analysis within a discussion of the history of the use of risk categories in public health, examining how these categories were taken up and reworked by participants as they justified their own behaviour. I look at how the *process* of categorisation positions condom use as a requirement for some subjects and not others, exploring this in the context of existing social categories of 'race', class, gender and sexuality. I look at the role that talk about condom use plays in the drawing of the boundaries around these social categories, and how this could be understood to reinforce particular social inequalities.

Chapter seven moves into an analysis of the more embodied aspects of condom use, analysing the framing of condom use as something that 'ruins the moment' of sex. In this chapter I deconstruct what the idealised 'moment' that was referred to by many participants looked like. I examine the construction of agency and desire in talk about condom use, and look at how this relates to the discourses of responsibility outlined in chapter five. Chapter seven also attends to the position of *gendered performance* in sex, exploring the dominant construction of 'great sex' and the challenges this posed in participants' narratives of 'great sex' and 'not so great sex'. In addition I look at the critically reflexive nature of stories about condom use, in which participants both reinforced and challenged dominant

discourses of normative sexual practices.

Chapter eight shifts focus towards participants' accounts of media representations of sex, looking at how these were positioned in relation to their own sexual experiences and knowledge about sex. This chapter develops the arguments about safer sexual subjectification from the previous chapters, exploring its relationship to mediated sexuality. I focus in particular on an analysis of participants' use of magazines, online communities and blogs, and pornography. I examine some of the pleasures and difficulties participants faced in negotiating sexualised media, arguing that media representations can be experienced as both liberating and regulatory. In this chapter I also conduct a discursive analysis of my case study media text, *The Jeremy Kyle Show*, situating this alongside an analysis of the participants' descriptions of the show and use of it in their talk about condom use. I employ the analytical arguments developed throughout the previous three empirical chapters, looking in particular at the ideological construction of self-care and risk in an episode of the show. I look at the dilemmatic and contested nature of the 'common sense' of condoms, developing an argument made throughout the thesis that ideological discourses are continually being taken up, reworked, challenged and reproduced in everyday talk about sex.

Finally, chapter nine draws together the central threads of the thesis, broadening the arguments out to reflect on their methodological and theoretical contribution to the critical study of discourse, and the interdisciplinary field of sexualities research which cuts across sociology, social psychology and cultural studies. In particular I explore the relevance of my empirical analysis to recent debates on the subject of neoliberal subjectivity, governmentality, and the gendered dynamics of desire and power. In particular, I pose my research as a challenge to an understanding of sexual negotiations that positions condom



use as a 'healthy choice' and outline some of the ideological implications for framing it as such. I conclude by reflecting on some of the limitations of the thesis, positioning my research as part of an ongoing feminist conversation about sexuality and power, and thus proposing potential further directions in which the work begun here could be developed.

## Chapter 2: Neoliberal sexualities

Scholars across disciplines have sought to understand the complexity of human sexual experiences and behaviours. Much of this research has aimed to contribute to sexual health policy-making by attempting to *predict* sexual behaviour and identify ‘risk groups’ for policy intervention. Over the last forty years, a growing field of interdisciplinary sexualities studies has challenged such categorisation, taking as its focus the changing nature of sexual practices, identities and attitudes in different socio-cultural contexts. In particular, social scientific work influenced by feminist, queer and poststructuralist theory has developed theoretical frameworks and qualitative methodologies that examine the complexities, fluidity and particularities of sexualities (McPhillips et al., 2001). This thesis builds on this body of critical social research that seeks to make an intervention in the production of discourse around sexuality (Gavey, 1997).

The representation of safer sex is an important and under theorised area within this field, particularly regarding the complex relationship between sexualised texts, audience and sexual behaviour. While cultural and media studies scholars have developed complex analyses of audience negotiation of media texts (Radway, 1991; Morley and Brunsdon, 2005; Hall, 2002; Nayak and Kehily, 2007), research into sexual behaviour and the media often rests upon the problematic assumption that media texts have a single reading, and that knowledge of sexual health messages will predict sexual health behaviour, through rational decision-making by a unitary subject (Murphy et al., 1998; Morton and Duck, 2000). Moreover, research which has produced the most sophisticated understandings of this process, sensitive to gender, class and sexuality (for example Buckingham and Bragg,

2004; Nayak and Kehily, 2007) has tended to focus on young people. While feminist discursive researchers have explored meanings and behaviour around condom use among adults (Gavey and McPhillips, 1999; Gavey et al., 2001), there has been insufficient attention to how these meanings are negotiated in relation to media representations of sex. This thesis examines behaviour and social attitudes around condoms as produced by the relationship between discourse, knowledge and power, in which subjects' embodied lives are experienced along unequal axes of power, including class, gender, 'race', sexuality, age and disability (Foucault, 1981; Holland et al., 2004, p.4).

This study is situated within a vast body of interdisciplinary work, not just of specific studies of sexualities, but also of the formation of subjectivities, the relationship between the individual and society, and the relationship between power, knowledge and the body. As Ken Plummer points out, researchers seeking to investigate sex find themselves in the midst of an overwhelming literature 'from every conceivable persuasion' (Plummer, 2003, p.x). Since the advent of AIDS, a huge amount of research has been conducted into understanding sexual behaviour, in particular people's engagement with practices such as condom use. In formulating the research questions and design, I have drawn on theoretical and empirical literature from a number of disciplines, but as with all research have had to make choices about which bodies of research to engage with. This chapter provides an outline of the relevant fields of work and theoretical debates that the thesis builds on. The chapter is divided into six thematic sections: the care of the self; public health and risk; the body; sexualities; sexual negotiations and condoms; and finally media, audience and sexual subjectivities. Chapter three will develop this engagement with the existing literature, outlining in more detail the feminist discursive approach I have taken in my research design and analysis.

## ***Care of the sexual self***

This study was undertaken in a particular moment in the UK, in which the individualised subject of late capitalism is repeatedly called upon to improve upon on themselves through self-help, makeover and hyper-consumption (Goldman, 1992; Giddens, 1993; Rose, 1998; Weber, 2005), and in which globalisation and multiculturalism have shifted notions of static, discrete identities (Durham, 2004). The analysis therefore required a theoretical framework able to address the complex processes involved in the formation of subjectivities, contextualised in the current social and historical moment.

My analysis takes at its centre a critique of rational, unitary subjectivity and aims to examine the messiness and contradictions of individual behaviours and identities, in the context of broader, structural power relations (Gavey and McPhillips, 1999). This position emerges in particular from debates within feminism about the nature of subjectivity and power. In seeking to understand the operation of gendered inequalities, feminist scholars have needed to examine how gendered oppression intersects with other inequalities structured by 'race', disability, class and sexuality. Intersectional (Crenshaw, 1991) approaches to gender emerged from critiques of feminist theorising that privileged the position of white, heterosexual and middle-class feminists 'speaking for' a presumed universal 'woman' (Rich, 1980; Lorde, 1984; Haraway, 1988; Mohanty, 1991; Alcoff, 1995). Postcolonial, queer and poststructuralist approaches have deconstructed the 'subject' of liberal humanism, pointing to the ways that universal categories such as 'woman' render invisible the power relations *between* and *within* such categories (Gavey, 1997, p.51; Wilton, 2004). Such deconstructions have often drawn on the work of Foucault (for example 1979), developing feminist poststructural analyses of power (Bartky, 2003; Farvid and Braun, 2006; Gill, 2008), which I explore further in chapter three.

In his later work, Foucault was interested in particular in 'the interaction between oneself and others, and in the technologies of individual domination, in the mode of action that an individual exercises upon himself by means of the technologies of the self' (Foucault, 2000a, p.225). Foucault examined the historical particularities of technologies of self in Greco-Roman philosophy and in early Christianity, in relation to the changing practice of the 'care of the self'. Foucault's work explored the shifting relationship of *knowledge* of the self to the practice of taking care of the self, identifying changes in this practice across different historical and cultural contexts. Foucault argued that the development of the human sciences from the eighteenth century onwards brought about changes in technologies of care with a greater emphasis on the positive construction of new selves, in contrast to the renunciation of the self found in early Christian thought (Foucault, 2000a, p.249). In this work on ethics, the self took on an active role in its own formation, though still constrained by its sociocultural circumstances:

I would say that if I am now interested in how the subject constitutes itself in an active fashion through practices of the self, these practices are nevertheless not something invented by the individual himself. They are models that he finds in his culture and are proposed, suggested, imposed upon him by his culture, his society, and his social group (Foucault, 2000a, p.291).

Foucault understood the care of the self to play a central role in the conduct of free subjects. As I discuss in chapter three, Foucault explored the function of discourse and knowledge in the production of 'techniques of power' in the governance of the population (Foucault, 2000b, p.125). Rose and Miller have followed Foucault's concern with the role of knowledge and 'regimes of truth' by exploring these questions in relation to the government of liberal democracies. Their work has explored the links between changes in

the operation of political power and the growth of the discipline and practice of psychology from the nineteenth century onwards (Rose, 1998, p.11; Miller and Rose, 2007). Rose and Miller developed Foucault's concept of 'governmentality' to investigate the 'conduct of conduct' (Miller and Rose, 2007, p.14). A focus on governmentality examines the *process* of governing, rather than a specific focus on the state as the sole origin of power. This process involves the creation of systems of knowledge about populations, focusing in particular on perceived problems that need to be solved. It is therefore linked to the development and application of fields of expertise (Miller and Rose, 2007, p.55). This focus of analysis becomes not just about exploring the institutions of the state, but about investigating the ways that individuals are called upon to govern *themselves* as responsible citizens. In a neoliberal, late capitalist context, self-governance is not just about responsible behaviour, but about making responsible 'choices' in the pursuit of self-fulfilment. Rose argues:

The forms of freedom we inhabit today are intrinsically bound to a regime of subjectification in which subjects are not merely 'free to choose', but *obliged to be free*, to understand and enact their lives in terms of choice under conditions that systematically limit the capacities of so many to shape their own destiny. Human beings must interpret their past, and dream their future, as outcomes of personal choices made or choices still to make yet within a narrow range of possibilities whose restrictions are hard to discern because they form the horizon of what is thinkable. Their choices are, in their turn, seen as realization of the attributes of the choosing self – expressions of personality – and reflect back upon the individual who has made them. The practice of freedom appears only as the possibility of the maximum self-fulfilment of the active and autonomous individual (Rose, 1998, p.17).

In this model of power, discourse and knowledge self-fulfilment is central to existence, whereby 'choices' are not simply behaviours but are constructive of the autonomous, authentic self. The successful subject of late capitalism is therefore constantly engaged in a project of self-transformation, linked to neoliberal discourses of individualism and social meritocracy (Giddens, 1993; Ringrose and Walkerdine, 2008, p.229; McRobbie, 2009). My analysis builds on this work, exploring the discourses of condom use in the construction of participants' sexual subjectivities. I draw on this work particularly in chapter five, where I explore the construction of condom use as a technique used to care for the self.

### ***Risk and public health***

Public health can be understood as a key site of governmentality. The advent of social medicine from the nineteenth century has played an important role in the development of fields of health expertise and related techniques of governance (Mort, 2007). Sexuality and sexual behaviour have been subject to intense scrutiny and the development of systems of knowledge which bear the marks of the histories of science, religion, morality and activism (Foucault, 1981; Mort, 2007; Waldby, 2007). This knowledge has been used in public health in the management of populations, producing discourses about 'normal' and 'moral' sex and thus playing a role in the constitution of normative sexualities (Hirsch et al., 2009, p.8).

Much of the multidisciplinary research about sexual health and condom use that has proliferated globally over the last thirty years has focused on the identification of risk factors, risky behaviours and 'risk groups' for public health intervention (for example Murphy et al., 1998; Martyn and Martin, 2003; Salazar et al., 2004; Shearer et al., 2005;

Knox et al., 2010). Critical sexualities scholars have explored the power relations in identifying particular social identities as 'risk groups', particularly in discourse about HIV/AIDS (Wilton, 1997; Miles, 1997; Kippax and Race, 2003; Waldby, 2007). Waldby argues that this categorisation has 'effectively (re)classified the sexual identities of whole national populations' (Waldby, 2007, p.6). Mort (2007) has tracked the development of classifications of risk and danger in sexualities from the nineteenth century, exploring the ways that the rise in public health linked to changing structures of capital and governance. He illustrates the powerful connection between discourses of morality, class and anxiety around the state of the nation, beginning his exploration at the state response to Cholera in Britain in the nineteenth century. Mort argues:

Official transformations at the level of the state defined a new field of social intervention and consolidated a particular regime of moral disciplining.

Representations of sexual immorality were constructed through institutional programmes which linked the habits and environment of the urban poor with medico-moral concepts of health and disease (Mort, 2007, p.15).

Mort contends that no simple pathway can be traced from the medico-moral discourse of the early nineteenth century to the public health response to sexually transmitted infections from the 1960s and advent of AIDS in the 1980s. However he argues that an historical focus on the relationship between power and knowledge can highlight how institutions come to define what count as authoritative representations of health and disease. His analysis follows how notions of immorality and disease were linked to the urban poor and led to an intensification of scrutiny of working class bodies, especially women's bodies. This representation of risk was also linked to imperialist discourses of national and racial



health in which non-white bodies were pathologised (Mort, 2007, p.163). In this way, particular bodies became marked for intervention, such as the forced examination and detention of sex workers under the Contagious Diseases Act in the mid nineteenth century.

Waldby's (2007) analysis of biomedical discourses around AIDS argues that medical classifications can perform a *violence* on subjects not just in terms of material, bodily interventions but in the positioning of certain bodies as inherently pathological by medico-moral discourse. She posits that biomedical knowledge makes claims to objectivity and rational scientific method, but should not be understood as separate from ideas circulating in culture (2007, p.5). The effects of this process are ideological, with some communities positioned not just 'at risk', but as posing a risk to others (Kippax and Race, 2003). Kippax and Race argue:

sexual difference, as in the case of 'gay', is conflated with deviance and, in turn, with immorality and disease. Similarly, women who for a variety of reasons engage in sexwork are positioned as 'prostitutes', thus promiscuous and vessels of disease. This over-determination occurs because medical science uses the term 'group' in the same way as it uses the term 'population': as referring to a number of individuals identified merely by their membership of a particular population or group as 'gay', or 'bisexual' or drug user' (Kippax and Race, 2003, p.2).

As Barker et al have argued (2007, p.669), this can result in generalisations that do not adequately capture the multiplicity of sexual experience and the different meanings that practices can have for different people or across time. Such generalisations can lead to

increased scrutiny and discrimination against sexual minority groups (Barker et al., 2007, p.674). This in turn positions those outside 'high risk' categories and people who are 'known' as 'safe' (Wilton, 1997, p.xiii; Miles, 1997). The association of 'safety' with heterosexual sex also obscures the key role that LGBT communities have played in the promotion of safer sex and HIV education programmes (Barker et al., 2007, p.674). However, the designation of particular groups as 'at risk' has an impact on the allocation of funds and support for health promotion. Watney is critical of approaches to HIV that treat it as an 'equal opportunities' problem (Watney, 2007, p.172). He argues that the 'de-gaying' of AIDS (2007, p.141) denies the complex ways that 'race', sexuality, class and gender position subjects differently in relation to risk (Vitellone, 2008, pp.6–8). Watney is particularly critical of the level of resources allocated for education and health promotion among the white heterosexual population in the UK when the highest proportion of new cases of HIV remain concentrated among gay and bisexual men, injecting drug users, with a high proportion of heterosexual cases being acquired outside of the UK (Watney, 2007, p.7; Vitellone, 2008; Terence Higgins Trust, 2012). Watney argues that this focus results from discrimination and has shaped the epidemic globally. The decision to categorise subjects in particular ways thus has discursive, ideological and material effects.

The relationship between public health and discourses of moral sexuality is not confined to issues of sexually transmitted infection. Through the development of biomedical knowledge, pregnancy has become increasingly medicalised (Lawlor and Shaw, 2002, p.552). Pregnant women's bodies have been categorised in different ways in relation to social norms and the structure of the family and workforce (Koffman, 2012). In recent years teenage pregnancy has become formulated within UK policy discourse as a matter of public health in need of intervention (Lawlor and Shaw, 2002). Koffman points to the role

of psychological expertise in the reframing of young pregnant women as posing a risk to the mental wellbeing of their unborn children. This psychological focus on young women has been compounded in recent years by classed discourses which call on girls and young women to lift themselves out of poverty through education and career aspiration. This has resulted in highly individualised discourses of gendered responsibility, in which teenage pregnancy is presented as *causing* poverty (Lawlor and Shaw, 2002). This obscures the systematic nature of inequality, reducing poverty to an effect of individual 'bad choices' or 'lack of aspiration'. In this sense, young women's bodies become sites for intervention, framed as important not only for the health of young women and their children, but the state of poverty and inequality in the country as a whole.

The labelling of teenage pregnancy as a public health issue has attracted a great deal of criticism for simplifying the complex links between poverty, education and pregnancy:

We do not agree that teenage pregnancy is shameful, nor do we believe that teenage pregnancy is (or is best conceptualized as) a public health problem; however, we do believe that the accumulative effect of social and economic exclusion on the health of mothers and their babies, whatever their age, is (Lawlor and Shaw, 2002).

Lawlor and Shaw further point to what they see as a contradiction in which women over 30 having children are not labelled a 'public health problem' despite greater medical difficulties experienced in this age group than their adolescent counterparts (Lawlor and Shaw, 2002, p.553). I would argue that this is not straightforwardly the case, but rather that women are faced with a narrow window in which they are not categorised as 'risky' in

terms of their fertility. Indeed, the categories of 'irresponsible fertile teenager' and 'irresponsible infertile woman' work in complex ways to produce each other in opposition (Tyler, 2008a). It is this public health discourse which has framed in particular young *working class* women as a risk category in terms of interventions around their reproduction.

### ***Rational choice? The discursive construction of condom use***

While research on sexual health issues has resulted in the identification of particular *groups* as 'at risk' or 'risky', sexual health discourse is also profoundly individualised. As argued above, the construction of health as an issue of individual responsibility frames sexual health in terms of choices. Watney argues:

most state-funded 'official' HIV/AIDS education tends to present HIV very much as a risk faced by isolated individuals, who are exhorted to renounce promiscuity, to 'choose carefully', and so on. In effect they amount to little more than moral management, and seem almost unrelated to the major, demonstrable routes of HIV transmission in the UK. (2007, p.141).

In framing sexual health in terms of individual choices, much research in this area has aimed to produce generalisations and predictions about sexual behaviour, looking in particular at variables such as self-efficacy (Kvalem and Traeen, 2000), drug and alcohol use (Cho and Span, 2010), attitudes about gender (Pleck et al., 1993) and knowledge (Stanton et al., 2009). Such generalisations can sometimes be based on what seems to be a quite 'one-dimensional' characterisation of a stable and consistent subject who acts

rationality on the basis of knowledge (Weedon, 1987, p.112; Gavey and McPhillips, 1999, p.351; MacPhail and Campbell, 2001, p.1614). For example, Murphy and colleagues' (1998) analysis of gender in 'sexual risk acts' employed the 'theory of reasoned action' and the 'health belief model' to examine 'social-cognitive factors' and 'behavioural skills' as predictors of 'sexual risk acts' among adolescents (Murphy et al., 1998, p.198). Similarly, Franssens et al's (2009) study of condom use among a group of gay and bisexual men utilised the 'theory of planned behaviour' to build a predictive model for condom use. These behavioural models, often used in health research, attempt to analyse and predict health behaviour based on individual intention and knowledge (Fishbein & Ajzen, 1975; Janz & Becker, 1984 cited in Murphy et al., 1998), sometimes with additional constructs added to the model, such as personal norms (Franssens et al., 2009, p.1471). These models have come under criticism from sociological and social psychological perspectives which stress the importance of understanding the relational context in which behaviours take place (Conley and Rabinowitz, 2004, p.540) and suggest that condom use is much more complex and contradictory than a question of rational decision-making (Gavey and McPhillips, 1999, p.352). Making an assumed link between intentions and behaviour has an impact on both the design and the kinds of recommendations made from research, meaning that research that uses these models tends to focus its conclusions on the development of individual skills and knowledge as a way to promote condom use.

In contrast, Nicola Gavey and colleagues' (2001) examination of women's condom use questions the link between intention and behaviour through a discourse analysis of participants' interviews, in which they explore the complexity and ambivalence in much of their participants' sexual behaviour. Gavey et al. (2001) argue that to focus simply on knowledge and negotiation skills surrounding condom use, without examining the multiple

discourses producing and regulating sex, denies the 'untidiness' of sexual subjectivity (Stanley, 1996, p.119), privileges phallogentric, coital sex and can prevent the incorporation of factors such as female sexual pleasure into sexual health programmes.

Such research influenced by feminist theory and poststructuralist analyses of power has questioned the assumptions made by health behaviour models by examining the messiness of sexual behaviour, and the ways that sexuality can be understood to be produced and regulated through discourse (Lupton, 1994; Miles, 1997; Rosenthal et al., 1998; McPhillips et al., 2001; Aguinaldo and Myers, 2008; Maxwell, 2007). This body of work has identified 'dominant discourses' of sexualities, exploring their reproduction and resistance through qualitative research with participants. These discourses are analysed as historically and culturally specific, produced in the context of a matrix of unequal power relations and the regulation of a heterosexual and monogamous 'imperative' (Butler, 1993, p.3; Ritchie and Barker, 2006).

For example, Gavey and McPhillips (1999) employed discourse analysis to explore female participants' accounts of difficulties faced in initiating condom use, in relation to dominant discourses of heterosexual romance, passive female sexuality, and an unstoppable male sexual drive. As Gavey et al. argue (2001), this male sexual drive discourse (Hollway, 1989, pp.54–7) presents sexual desire as a repressed masculine, coital imperative to orgasm, where male pleasure is privileged and 'spontaneous' intercourse is therefore presented as something that should not (or cannot) be interrupted (Potts, 2000; Ryan, 2001). Gavey et al found that this sexual drive discourse could also be reinforced even when condoms *were* used, as some participants felt that they enforced intercourse and male orgasm as 'the finale of sex' (2001, p.929). I build on this work in chapter seven, exploring how participants both reinforced and challenged this normative construction of the 'script'

of sex. In much of the research on heterosexual negotiations this discourse is analysed as central to difficulties that female participants faced in initiating condom use with men. Discursive analyses have related this to the notion of romantic spontaneity as a 'natural' force with the male mind considered to be absent and 'swept away' by his desire. This gendered narrative of desire consequently positions women as the gatekeepers of sexual health and their own fertility, particularly in contrast to men in the normative construction of heterosex (Hollway, 1989, pp.54–7; Potts, 2001).

Existing research on the negotiation of condom use has explored the complex relationship between desire, risk perception, commitment, romance, trust and love (Holland et al., 1990; Rosenthal et al., 1998; Gavey and McPhillips, 1999; Ryan, 2001; Holland et al., 2004; Knox et al., 2010; Braun, in press). Holland et al. (1990, p.125) capture this relationship in the statement that 'if love is assumed to be the greatest prophylactic, then trust comes a close second'. This relates importantly to the symbolic role that condoms can play in the construction of particular kinds of relationships. As explored further in chapter six, research on contraceptive use has found a discourse of commitment in which condom use is associated with casual sex, and the contraceptive pill becomes associated with trust, love and more 'steady' relationships (Holland et al., 1990). Holland et al. (1990) found that their participants' change in contraception had not necessarily been informed by further information about their partner's sexual history, but rather a reliance on 'trust' as a protection against infection (see also MacPhail and Campbell, 2001, p.1615). Conley and Rabinowitz (2004, p.539) have termed this the 'normative contraceptive transition script'. Similarly, Rosenthal et al (1998) found that their participants presented seeking romance as an outcome of casual sex as a barrier to the negotiation of condom use.

Research on sexual negotiation has also explored 'negotiated safety', when partners make

an agreement to stop using condoms and either practice safer sex with other partners or negotiate a monogamous sexual relationship (Kippax and Race, 2003). Negotiated safety is understood as a strategy to reduce the risk of HIV and STI transmission, and has been explored in particular in research about gay men's strategies to reduce risk in unprotected intercourse (Eisenberg et al., 2011; Dean, 2009, p.12). Other strategies identified in the literature include 'serosorting', in which partners have unprotected sex only with partners who say they have the same serostatus. Dean has argued that such strategies have arisen among gay men in response to 'the widespread rejection of condoms' (Dean, 2009, p.12). These strategies draw on similar discourses of trust to the contraceptive transition script noted above, an issue which I discuss in relation to participants' accounts of negotiated safety in chapter six.

Analyses of sexual risk perception have drawn discursive links between assumptions of trust and the characterisation of STIs and HIV as risks of 'others' (MacPhail and Campbell, 2001, p.1619). This has been explored in existing research in relation to the social stigmatisation of AIDS and the subsequent belief that someone who is 'known' could not possibly be HIV positive (Miles, 1997; Knox et al., 2010) or that sexual risk is something that only affects certain groups, as outlined above (Ryan, 2001, p.92). Sexual encounters can therefore be understood as complex and socially constructed experiences, in which condom use is not simply a matter of assertiveness or making healthy choices (Gavey et al., 2001). Cultural meanings about condoms, relationship expectations and unequal relations of power based on class, gender, 'race' and sexuality all form part of the discursive and material conditions in which intimate negotiations take place. For example, Tamsin Wilton argues that even where risk levels may be known, the gendered power imbalance within heterosexual encounters can prevent women from having control over whether they engage in heterosex in the first place, let alone enforce the use of condoms (Wilton, 1997,



While much feminist sexualities scholarship has sought to examine inequality within heterosexual encounters and relationships, it has also examined resistances to phallogentric and heteronormative discourses, and theorised female sexual agency and desire (for example Ryan, 2001; Hockey et al., 2002; Allen, 2003a; Tolman, 2005). Holland et al. have explored the position of sexual empowerment for women negotiating heterosex as ‘an unstable *process* with contradictory outcomes’ (Holland et al., 2004, p.118). Resistance to dominant discourses of sexuality can be conceptualised as a continual struggle over meanings and bodily integrity within the context of a society where both symbolic and physical violence shape people’s experiences. For example, Holland et al.’s (2004) case studies of ‘female empowerment’ examined the resistances of young women to dominant discourses of male-centred sex as they negotiated sexual safety for themselves. These kinds of resistances are examined throughout the literature (see also Miles, 1997; Gavey et al., 2001) and in a Foucauldian sense, are central to the discursive production of sexualities.

## ***The body***

Although this thesis focuses in particular on the meanings and discourses around condom use, it does not ignore the embodied nature of sex. Condoms are a physical barrier between body parts, toys and bodily fluids, used in the prevention of unwanted pregnancy and infection. Their lack or incorrect use can result in bodily changes or harm. The sensations or operations of the ‘natural body’ are often invoked as reasons for dislike of condoms, such as lack of sensation or an interruption in the ‘natural’ bodily flow of coitus (Gavey et al., 2001, p.930), and more unusually, they are related to bodily pleasure, such as the

marketing of condoms as sex enhancements (Philpott et al., 2006, p.25). While these processes and experiences are produced and made sense of through discourse, condom use can be understood in terms of interactions between the body and the social world. There is much debate, theoretical work and research about embodiment, particularly since the 'turn to the body' in social theory began in the 1980s (Fraser and Greco, 2005, p.2).

Much of the scientific and social theory emerging from Enlightenment philosophical thought is influenced by the work of Rene Descartes, who theorised a fundamental separation between mind and body, in which the body is the involuntary, natural given that is tamed and controlled by the rational mind (Howson, 2005, p.15; Blackman, 2008, p.4). Poststructuralist and feminist critiques of this 'Cartesian' dualism have highlighted the constructed hierarchies inherent in such divisions, in which mind/body is equated with other binaries such as male/female, public/private and rational/emotional (Cixous, 1997, pp.231–232). Feminist scholars have examined the way that such binaries have worked to exclude women from the public sphere (de Beauvoir, 1953) and normalise discrimination based on identity categories such as gender, sexuality and 'race' (Wittig, 1992; Ramazanoglu and Holland, 2002, p.28; Sedgwick, 2008). While liberal feminists first sought to address this divide by seeking equality of access for women in the 'masculine' hierarchies of rationality and participation in the public sphere, scholars such as Judith Butler have sought to subvert and dismantle the binaries altogether (Butler, 2006).

The relationship between the mind and the body is a site of persistent theoretical debate. Feminist scholars have tended towards theories which take into account the 'constraints and possibilities' (Holland et al., 2004, p.97) of the body, as a site of oppression and resistance. This thesis engages with theories of the mind and body that highlight the way in which discourse constructs bodies that are intelligible at a particular social moment (Butler,

1993), rather than assuming an essential, static entity separate from the mind. The body, and the sexual behaviour that the body engages in, are therefore understood to 'acquire their meanings in the contextually specific discourses in which they appear' (Oerton and Phoenix, 2001, p.391). Research in the field of sexualities has examined this historically located discursive formation of bodies and bodily practices. For example, Sarah Oerton and Joanna Phoenix (2001) examine the role of discourse in producing sex and body workers' experiences of sexual practices as embodied and disembodied, in relation to acceptable forms of labour. Stephen Katz and Barbara Marshall (2002) have interrogated the discursive processes in producing the 'aging body' as sexually dysfunctional, in relation to the drive for new markets for pharmaceutical companies. Imogen Tyler has examined the rise of the derogatory term 'chav mum' and its role in bringing into being a categorisable and vilified excessively reproductive body (Tyler, 2008a, p.30). This kind of work has not only examined the discursive production of the body, but has also shed light on the social structures and power relations within which its production occurs.

If the body is made intelligible through discourse, then, a feminist reworking of Foucault's conception of 'micro' power is useful in understanding its continual reproduction and regulation, as outlined in the following chapter. In particular, feminists have used Foucault's (1979) concept of *docile bodies*, in which the subject regulates the body through internalised discourses, to understand the regular disciplining of gendered bodies. While this regulation has tended to be conceptualised as discursive, many feminists have drawn attention to the materiality of gendered embodiment (Holland et al., 2004, p.96). Bartky, in her analysis of the gendering of bodies and bodily practices, outlines disciplinary practices which:

aim to produce a body of a certain size and general configuration...[and] bring

forth from this body a specific repertoire of gestures, postures and movements;  
and... are directed toward the display of this body as an ornamented surface  
(Bartky, 2003, p.27).

Borrowing from Foucault's imagery of the panopticon prison, feminist analyses of disciplinary power highlight bodies that are under surveillance not only from the policing of the male gaze, but from a critical internal supervisor-self. Analyses of the growing makeover genre (Weber, 2005), and the rise in the practice and discursive construction of cosmetic surgery (Morgan, 2003; Braun, 2005) have highlighted the power of such an all-seeing surveillance, obscured by discourses of choice in the construction of the 'feminine body subject' (Bartky, 2003, p.33).

This work on the regulation of appropriately gendered bodies provides important foundations for the study of condom use. Janet Holland and colleagues found in their study of young people and heterosexuality that participants' sense of embodiment, desire and agency were differentiated by gender (Holland et al., 2004, p.98). In particular, they found that many young women they interviewed presented a sense of alienation from their bodies, despite the regular construction of themselves as feminine subjects. Holland et al. argued that dominant discourses of femininity, in which feminine sexual desire is passive, regulated the way that these young women experienced and spoke about their sexuality (2004, p.99). Since the research was conducted, some feminist scholars have pointed to a shift in the nature of dominant norms of feminine sexuality towards the reproduction of a more sexually knowing and desiring (but specifically heterosexual) subjectivity (Gill, 2008; McRobbie, 2009). This thesis builds on the analysis conducted by Holland et al (2004) and subsequent work exploring gender, sexuality and agency (for example Buckingham and Bragg, 2004; Gill, 2007a; McClelland and Fine, 2008; Renold and

Ringrose, 2011), to examine the ways that both male and female participants make sense of their own embodiment in relation to condom use in the context of changing dominant discourses of gendered sexuality.

Masculinities research has examined the discursive construction of masculinities as socially located, historically contextual, finding gendered disciplinary practices particularly around the regulation of body weight, hair and muscle (Drummond, 2011). Researchers exploring the social construction of masculinities have examined how such regulation differs across axes of identification, with Connell influentially arguing that a system of 'hegemonic masculinity' regulates power among men and defines intelligible forms of masculine subjectivity (2005, p.xviii). Such work can be understood in conversation with feminist analyses of female embodied experience which have taken a critical view of the social regulation of women's bodies. Critiques of medical discourse and the beauty industry have analysed the institutional operation of power in the construction of bodily norms, and are often linked to feminist activism which calls upon women to take back control of their bodies (Bartky, 2003, p.33). Consciousness-raising efforts by feminist activists have challenged medical discourses of sexuality, encouraging people to find out more about their bodies, their sexuality and their desire and create alternative representations of bodies. More recently, proponents of the 'new view' of female sexual problems have used experimental research to critique the medicalisation of 'sexual dysfunction' as a classificatory system, and present an analysis of bodily desire linked to the social context of sexual behaviours (Tiefer, 2004; lasenza, 2008). Feminist scholars continue to debate the relationship between power and the body in relation to pornography, the sex industry, the beauty and cosmetic surgery industry and media representations of female sexuality. For example, while some feminists have attacked practices of bodily modification such as cosmetic surgery as harmful (Chambers, 2004; Jeffreys, 2005), others

have presented cosmetic surgery as a matter of agency and choice (Davis, 1994), examined its discursive construction (Braun, 2005) or explored the potential transgressive power of such body technologies (Negrin, 2002).

This thesis adds further empirical analysis to these ongoing feminist discussions, examining participants' accounts of their sexual experiences in relation to discourses of embodiment, desire, resistance and agency. In doing so, the thesis makes a contribution to feminist scholarship that critically examines the operation of power at the site of the body, but also analyses moments of resistance, tension and ambivalence (Gavey and McPhillips, 1999; Tolman, 2006; Maxwell, 2007; Bryant and Schofield, 2007; Renold and Ringrose, 2011) and takes into account the material and structural restrictions to such resistance (Jackson and Scott, 2010).

### ***Sexualities, power and agency***

Since the 1960s, scholars of sexuality have critiqued notions of a 'natural' sexuality, developing theories of constructed, historically located, complex and changing sexualities (Foucault, 1981; Waites, 2008, p.540; Plummer, 2008, p.7). Studies of sexualities across disciplines have examined the emergence of sexuality as a Western 'historical construct' in the eighteenth century (Foucault, 1981; Weeks, 1981, p.4) in which sexual identity is ascribed from sexual acts (Bhattacharyya, 2002, p.41). Analyses of the historical construction of 'common sense' discourses of sexuality have highlighted the silent power that operates in the hierarchical and binary categorisation of sexualities, producing subject positions of 'normality' and 'abnormality' (Weeks, 1981, p.5) across intersecting social identity categories. These categories can be understood to operate as an intersecting matrix of inequality, within which subjectivities are repeatedly performed, policed and contested

(Butler, 2006, p.19)

Feminist and queer theorists have explored the operation of heteronormativity (Warner, 1994) through institutions such as Education, Law and Medicine (Rubin, 1982; Wittig, 1992; Epstein et al., 2003) and through its repeated production through the dominant discourses of the 'heterosexual matrix' (Butler, 2006). As noted above, this critique has also been levelled at some second wave feminists for neglecting lesbian and bisexual voices in their scholarship (Rich, 1980). This thesis makes a contribution to scholarship that highlights the exclusions produced in silent assumptions about sexuality as heterosexual and monogamous (Ritchie and Barker, 2006; Barker and Langdridge, 2008), turning the light onto varied sexual practices and identifications.

Social theorists have traced changes in practices of intimacy and related these to shifts in relationship and family structures. For example, Giddens (1993) has linked changes in norms of sexual relationships to social changes brought about through a transition to late-modernity. Giddens outlines what he considers to be the individualised development of a more democratic 'pure relationship', which is:

Entered into for its own sake, for what can be derived by each person from a sustained association with one another; and which is continued only in so far as it is thought by both parties to deliver enough satisfactions for each individual to stay within it (Giddens, 1993, p.92).

Feminist theorists have critiqued Giddens' work for advancing an individualised choice-based perspective that can obscure material constraints faced in sexual and romantic relationships, and ignore past and present 'battles' fought against inequality (McRobbie,

2009, p.19).

My analysis has sought to understand how participants construct notions of power, agency and desire in their accounts of their sexual experiences. Dean (2009) has pointed to the importance of understanding the role of desire and fantasy in sexualities research. He argues that the concept of desire was fundamental for his research into the practice of unprotected anal intercourse and the development of a subculture of 'barebacking' among some groups of gay men. Taking desire into account necessarily foregrounds questions of power and agency, and I would argue also requires an understanding of the relationship between desire and discursive and structural constraints. For example, Jackson and Cram (2003, p.123) argued that their participants adopted 'agentic' discourses of sexuality, while also reinforcing the traditional notions of female sexuality as either 'Madonna' or 'whore'.

Similarly, Allen (2003b) explores the tenuous nature of agency represented by her young female participants as they explain their prioritisation of male sexual needs as an 'active choice' (and therefore, she argues, from a position of power). While I would argue that it is important to listen to women's voices and narratives, a feminist analysis of power should critically examine the language of agency – the statement or belief of individual 'choice' and 'power' in any given situation should not necessarily be taken as read (Tang and Lindemann. 2006, p.187). I explore this methodological and analytical challenge further in chapter three.

In contrast to Allen's (2003b) approach, Amy Wilkins (2004) presents a critical account of self-represented female sexual desire, agency and power within the context of a local 'Goth' scene in the US. Wilkins analyses the points of resistance to dominant discourses of female heterosexual passivity, such as articulating an active female sexuality through



'dressing sexy' as an activity of female pleasure, and in some cases as parody of the conventions of heteronormative feminine aesthetics (2004, pp.337–8). She adopts a critical stance towards this positioning by her female participants, analysing these performances of femininity as more 'mandated' than characteristic of 'choice'. Feminist academic work has long grappled with conflicting notions of female pleasure and agency, treading a fine line between presenting women as 'passive victims' and accepting without interrogation the re-adoption of practices previously questioned by feminists as oppressive (see for example Whelehan, 2000; Levy, 2006 for critical accounts of 'ironic' and 'postfeminist' reworkings of old sexism). On first reading, Wilkins' (2004) analysis of her participants' self-representations seems reminiscent of a second wave feminism that has been criticised for a 'puritanical' approach towards women (Whelehan, 2000, p.80), arguing that any 'gains' made by her female participations in their sexual self-representation 'are mitigated...by the persistence of sociocultural ideas that position men as sexual consumers/owners' and that 'simply increasing women's right to enjoy sex does not undo the basic heterosexual relationship that confers men with sociocultural power' (2004, p.346). However, crucially, Wilkins does not attack the women themselves for their practices, and recognises their moments of resistance to heteronormativity.

This theoretical approach, that allows for ambivalence and multiplicity in participants' accounts, while situating the analysis in a broader critique of gendered power relations, is found within a range of writing on sexualities (see for example Kippax et al., 1990; Gavey and McPhillips, 1999; Tolman, 2006; Jackson, 2006; Maxwell, 2007; Bryant and Schofield, 2007; Ringrose and Walkerdine, 2008; Schwartz, 2007; Renold and Ringrose, 2011). This approach also importantly develops analyses that take into account the material and structural constraints which intersect alongside notions of sexualities (Jackson, 2007; Dworkin and O'Sullivan, 2007). For example, Stevi Jackson draws attention to the

different cultural and material tools available for resistance along differing hierarchical axes of oppression, such as class and 'race', giving the example that "working class women who are too obviously sexual are more likely to provoke public distaste, even disgust, than middle-class women with independent lifestyles" (2006, p.111). The feminist discursive approach I have taken thus aims to analyse the use and representation of condoms in relation to the cultural and material tools available to participants, discussed in greater detail in the next chapter.

### ***Media, audience and sexual subjectivity***

This thesis combines an analysis of participants' experiences and the ways that they engage with sexualised media texts, with a discursive analysis of a textual case study. The research therefore builds on the extensive work of film, cultural and media scholars concerning the relationship between media text and audience. Early media research approached media texts as single-meaning, in which audiences were positioned as the recipients of such texts as 'hypodermic needles' on their consciousness (Gill, 2006, p.17). The work of cultural theorists at the Centre for Contemporary Cultural Studies in Birmingham from the 1960s onwards was particularly influential in the critique of this approach, analysing media texts as 'negotiated' rather than merely soaked up by audiences. David Morley and Charlotte Brunson's (2005) analysis of audience responses to UK television show *Nationwide* led the way for subsequent analyses of audience negotiations of media texts, and how such negotiations relate to social identifications such as class (Gill, 2006, pp.17–18). Morley and Brunson's study built on the work of Stuart Hall in his significant (1980) paper on the subject of audience encoding/decoding of media texts, and engaged with the Gramscian understanding of the operation of class power through hegemony in order to explore the production of common sense in media representations of the 'unimportant and trivial'

(Morley and Brunson, 2005, pp.7–11). The concepts of hegemony and common sense are discussed in more detail in chapter three. Hall, Morley and Brunson have inspired a great deal of research with audiences, especially that which explores the role identity groupings can play in alternative readings of media texts. For example, Meenakshi Gigi Durham explores 'oppositional decoding' (Durham, 2004, p.152) of media texts during focus groups with South Asian immigrant girls in the US. Gigi Durham found that far from reproducing dominant discourses of sexuality:

For the girls in this study, sexual self-identification is a political project that is articulated to gender, race, and culture. Inherent in it is a critique of the dominant discourses of assimilation that would draw them into the culturally fetishized role of the hypersexual woman of color, and a concomitant critique of the essentialized, marginal sexual script of the Indian immigrant (2004, p.157).

Gigi Durham argues that such critiques provided possible sites of transformation of gender and sexuality. This thesis contributes to a field of work which explores the role of media in constructing sexual knowledges, behaviours and subjectivities. I adopt an analytical framework that positions media texts as historically and socially located, with multiple meanings which are constantly renegotiated from the social location of both the research participants and the researcher.

Analyses of gendered media representations emerged from feminist concerns about gender stereotyping and objectification, linked to a growing activist movement in the 1970s targeting sexist imagery (Gill, 2007c, p.9). Textual analyses of mainstream media and advertising critiqued the portrayal of women as compartmentalised commodities

(Goffman, 1979) and radical feminist analyses attacked the pornography industry, arguing for a causal model between pornography and sexual violence (Dworkin, 2000; Russell, 2000). Scholars in recent years have identified a growing sexualisation of mainstream culture (Attwood, 2006), which has been variously termed 'pornification' (Paul, 2005) 'striptease culture' (McNair, 2002) and 'raunch culture' (Levy, 2006). The word 'sexualisation' is often used in different ways by different people, which has important implications for any claims about cause and effect being made by researchers or policy makers, or attempts to compare research in this area. Sexualisation is best understood as an umbrella term that broadly refers to the notion that 'Western' culture is experiencing an increase in sexual representations and discourses, where the lines of pornography and mainstream representations of sex become blurred and where sexuality is positioned as central to the self (Attwood, 2006; Harvey and Gill, 2011).

With fault lines in the 'sex wars' of the 1970s, scholarship, activism and mainstream debate on the topic of sexualisation has remained quite polarised (Harvey and Gill, 2011). Fierce debates about the potential 'effects' of sexualised media content continue, with some more recent scholarship responding to developments in cultural and media studies, moving towards analyses of how sexualised media is negotiated by audiences and explorations of the potentially transgressive potential of some sexualised media (Attwood, 2007; Buckingham and Bragg, 2004; Buckingham et al., 2010). Some commentators such as Brian McNair (2002) have argued that the development of capitalism and mainstream commercialisation of sex has 'democratised' sex, enabling sexual expression of previously marginalised sexual identities and behaviours, and transferring knowledge about sex into the mainstream. Others have critiqued such celebratory perspectives, pointing to the regulatory effects of the narrow range of sexual representations and the rise of the language and techniques of management directed at intimate life (Tyler, 2004; Gill, 2008).

Feminist analyses have shifted in relation to changing social structures in late capitalist societies, exploring the kinds of sexual exclusions operating through the regulatory discourses of neoliberalism and hyper-consumerism in which the normatively sexualised body is young, white, middle class and able-bodied, and visible sexuality outside these boundaries is policed as 'disgusting' (Tyler, 2008a). As I noted above, much media research has moved towards complex analyses of the relationship between representation and audience. However, dominant discourse in policy in the UK continues to reproduce notions of straightforward and homogeneous media effects (for example Papadopoulos, 2010). Policy discourse about sexualisation continues to be framed in highly classed and moralising terms, with girls' bodies marked as sites of social anxiety and intervention (Attwood et al., 2011; Egan and Hawkes, 2008). Buckingham and Bragg (2004) caution against media panics regarding 'the dangers of sexual content' particularly for young people, finding that their young research participants often negotiated media texts from a knowing position. Bragg and Buckingham argue that such media panics often obscure the perspectives of young people, and that for related policy to be effective it must include children's voices (Buckingham and Bragg, 2004, p.248; see also Buckingham et al., 2010). While my research focuses on adults, my approach builds on this work, examining the accounts that *participants* give of media representations of sex in their everyday lives, rather than assuming monolithic 'effects' of sexualised media.

This thesis starts from the perspective that media representations can be understood as sites at which sexualities are socially constructed, including what is normative, deviant, what counts as 'great sex' and who is entitled to have it. In the context of the neoliberal discourses of self-care and self-improvement discussed above, of particular relevance is the rise of the sex self-help genre and industry. Mediated sex advice is produced across a range

of texts, including magazines (Rogers, 2005; Farvid and Braun, 2006), television (Harvey and Gill, 2012), books or manuals (Klesse, 2007) and more recently online (Wood, 2008; Barker and Gill, 2012). The advice is often given out by celebrity 'sexperts' who are brand names themselves, with toy ranges, books, websites and television programmes all combining to produce intertextual expertise (Boynton, 2009; Harvey and Gill, 2012). Research exploring mediated sex advice has analysed the proliferation of managerial and entrepreneurial discourses, in which sex and relationships are tackled 'like a job interview' (Gill, 2009) and in need of 'efficiency' and 'timetabling' (Tyler, 2004, p.95) in Fordist-like 'production' (Rogers, 2005).

An analysis of self-help can be informed by literature exploring the genre of makeover, as producing individualistic discourses of self-improvement (Rimke, 2000, p.62; Weber, 2005, p.4) through a narrative in which consumption leads to the all-important achievement of a subject's 'true' self (Weber, 2005). Sex self-help, often presented as objectively 'scientific' (Rogers, 2005, p.189) has been interrogated in its tendencies to produce gendered dynamics of sexual pleasure as related to male and phallogentric sexual pleasure (Tyler, 2008b) and in its operations of exclusions, for example the construction of disabled sexuality as a matter of individualised improvement, rather than a site of structural inequality (Sothorn, 2007).

Such production of meaning about sexuality is an important area of investigation, as individuals engage with texts as sites for learning, whether this is a conscious effort for sexual self-improvement, or a site at which social norms are produced and contested (Ashcraft, 2003, pp.39–40). In addition to illuminating and critiquing representations of 'common sense' sexuality, scholars have also examined media texts for moments of discursive tension, resistance and sites of transgression. For example, in her analysis of the

film *American Pie*, Catherine Ashcraft (2003) argues that popular texts should be incorporated into formal sex education. Ashcraft suggests that encouraging critical discussion of the representation of sex in selected popular media texts would resonate with adolescents and open out exploration of subjects such as female desire and non-penetrative sex, which she argues are often missing from more 'functional' sex education programmes that focus heavily on 'consequences' of sex in an attempt to reduce teen pregnancy and STI rates. Similarly, Elizabeth Wood explores the ways that women have developed 'vocabularies of desire' (Wood, 2008, p.480) through their use of online 'sex blogs'. Wood presents the proliferation of such immediate information through personal narratives of female sexuality as a form of 'mediated consciousness-raising' and argues that there is a need for a 'sex commons' in order to facilitate women finding information about sex aside from that produced by multinational pharmaceutical companies (Wood, 2008, p.485).

In exploring the relationship between the negotiation of media and the construction of sexual subjectivity, I will be building on Gill's (2003) concept of *sexual subjectification*. This concept aimed to capture the complex ways that sexualised representations of women have shifted in recent years, incorporating feminist critiques of objectification and resignifying hypersexualised representations as empowering, addressing female subjects as actively desiring and 'up for it'. Gill develops Radner's concept of 'technologies of sexiness' (1999), to suggest that there has been a shift from dominant notions of virginity and passivity as central to female sexual subjectivity, to a construction of feminine sexuality as empowered, agentic and skilled. Gill has taken a critical view of this process, conceptualising it as evidence of a cultural shift from a 'external male judging gaze to a self-policing narcissistic gaze' (2003). The move towards sexual subjectification from objectification references the central position of *choice* in discourses of sexual representation. Gill argues that becoming a 'sex object' has been reformulated as a question

of choice, agency and power rather than passivity and disempowerment, making feminist critique of such representational practices more difficult. The concept of sexual subjectification builds on Foucault's analytical concept of subjectification, which positions individuals as actively constructing their subjectivity within the discursive and material constraints of their social context. Gill's work also builds on Rose's work on governmentality (Rose, 1998) to suggest that sexual subjectification involves not only a transformation in sexual behaviours but the requirement to work on and improve the psyche and relationship to the self (Gill, 2009, p.365). As such, being 'empowered' becomes a further normative requirement for successful neoliberal femininity (Gill, 2012). My analysis develops this concept, exploring the concept of *safer* sexual subjectification, in which participants are called upon to work on their sexual health as part of a project of agentic self-formation. I explore in particular the gendered nature of this process, in which the expectation to take charge of sexual health is constructed as the responsibility of some subjects more than others.

Engaging with diverse literatures across disciplines, this thesis closely examines participants' accounts of condom use, and how they engage with media representations of sex and condoms. Building on analysis of the relationship between the body, knowledge, power, representation and the construction of the social world, the work must also be situated in relation to the production and regulation of sexualities in the context of global capitalism. The research therefore contributes to a body of feminist research that explores the complexity of sexual experiences and representations, drawing attention to the operation of power in everyday life. In doing so, this thesis has sought to develop a theoretical framework that can attend to both the fine-grain of participants' accounts and their broader social context. In the following chapter I outline this theoretical approach in more detail.



## Chapter 3: A feminist rhetorical approach

Conducting research about sex undoubtedly poses many challenges. There are practical, ethical and theoretical questions at the heart of any study of the intimate moments of people's lives. Researchers from disciplines across the spectrum have been fascinated by the world of sex – perhaps partly because it is often so hidden from view. Sex researchers have classified, experimented, coaxed and co-constructed sex and continue to do so as our cultural worlds become increasingly filled with sexual stories (Plummer, 2003). Ken Plummer sums this up in the comment that 'if once, and not so long ago, our sexualities were shrouded in silence, for some they have now crescendoed into a cacophonous din' (2003, p.4). As a feminist, what does it mean to focus my attention on the much-researched field of sexuality, adding yet one more voice to the storytelling din? As I collected, analysed and wrote up my data, the economic and political landscape of the UK was shifting dramatically. My fieldwork took place in the context of global recession, a Conservative and Liberal Democrat coalition government coming to power in the UK, growing unemployment and global uprisings. I wondered about the utility of a focus on sexuality and representation when so much else in society seemed to be at stake (Bhattacharyya, 2011).

However, as I analysed the data I was reminded, as many feminist scholars and activists have argued before, that power does not only operate at the levels of state policy, or global movements. The private sphere, as Cynthia Enloe (2001) has persuasively argued, is made up of the moments that sustain and reproduce social life. These moments also contain within them the potential for challenges to injustice (Gill, 2011a). In the midst of revolution in Russia and calls to focus on the immediate concerns of economics, Alexandra

Kollontai argued for the importance of examining the operation of power in the private sphere, to search for 'the thread that will make it possible to undo the tightly rolled up tangle of sexual problems' (Kollontai, 1972). While I would not suggest that there is *one* thread that can bring about such untangling, I sought to develop methods that would help me to unravel some of the complexity of power in sexual negotiations at the start of the twenty-first century. I am concerned in particular with how gender intersects with other relations of power in these moments. This chapter will explore the feminist methodological approach I have taken. I will outline the theoretical framework for my analysis, including a discussion of the combination of a discourse analytical method with an examination of the relationship between discourse and ideology in everyday life. In the next chapter, I will outline the methods used to collect the data.

### ***Feminist methodology***

This research began as a distinctly feminist project. I wanted to take up the challenge set by Holland and colleagues and 'turn on the light and start talking about bodies, feelings and desires' in sexual negotiations (Holland et al., 2004, p.173). As such, I was interested in how power and resistance worked not only in extreme moments, but in the mundane, pleasurable, awkward, funny, embarrassing, exciting, boring and painful everyday moments of participants' lives (Hockey et al., 2007). Feminist scholars have conducted detailed empirical work on the moment of condom negotiation, as discussed in the previous chapter (see for example Gavey et al., 2001). My research builds on this tradition, exploring participants' accounts of living gendered lives.

While much social research, particularly critical and radical work, explores the operation of power in social life, research which labels itself specifically 'feminist' is concerned

especially with the operation of gendered power, with a political and normative aim to understand inequalities and work against injustice in society (Ramazanoglu and Holland, 2002). As such, feminist research has developed in relation to broader political movements for change (Jackson and Scott, 2010, p.23). While feminist researchers take up this project from a wide range of epistemological and theoretical positions, feminist methodology shares a critical approach to the role of power in the production of knowledge, and consequently the research process itself (Ramazanoglu and Holland, 2002). Taking a feminist approach to methodology has shaped the research questions, methods, analysis and writing of this thesis. Feminist activists and academics have often focused their attention on spheres of life that are considered 'private' and on the everyday experiences of participants. This approach sees daily life as part of politics. The question of sexual experiences, taken from a feminist perspective, therefore frames the private lives of participants as a site for political understanding. The study of experiences of condom use in this thesis is shaped by a feminist concern to understand how gender is produced, maintained and sometimes challenged in these moments. As discussed in the previous chapter, the thesis also builds on a body of work that has explored the representation of gender in media texts, and has sought to analyse the complex and multiple ways that people interact with these texts.

Any methodology must be situated within an ontological and epistemological framework. This thesis builds on a social constructionist understanding of intimate life as a site where the social and psychological interact in complex ways. The research is therefore concerned with the meaning that participants give to their sexual experiences and their interactions with media representations of sex. The research does not assume the transparent operation of language. Rather than attempt to uncover the 'truth' of participants' experiences, the research engages with participants' *accounts* of their experiences and explores their

relationship to power. This required the design of research methods that would foreground participants' voices, and an analytical approach that could explore the meaning of them in the context of gendered inequality. Feminist researchers have often sought to foreground their participants' voices, particularly taking the perspective that they are making space for those who are otherwise marginalised or trivialised (Kitzinger and Wilkinson, 1997). This raises dilemmas in the development of methods that take participants' voices seriously, acknowledging the agency of participants, but also keeping an awareness of the weight of normative assumptions about sexuality on both the researcher and the researched (McClelland and Fine, 2008). McClelland and Fine (2008) have explored this dilemma in relation to their research with young women. They contend that as feminist researchers we must attend to the ideological contexts of our participants' utterances and silences. As Kitzinger and Wilson (1997) have argued, this means not just 'faithfully reporting' participants' accounts:

Routinely validating women's experience can be positively dangerous in enforcing dominant constructions. Moreover, there are many aspects of our own and other women's experience that we want to *change* rather than to accept. (Kitzinger and Wilkinson, 1997, p.573).

They call instead for an approach that challenges the 'taken for granted assumptions' of participants within a broader 'feminist ethics of criticism' (Kerslake, 1997 cited in Kitzinger and Wilkinson, 1997) that is mindful of the context and way that such challenges to both participants and other feminist scholars are made (Kitzinger and Wilkinson, 1997). In the context of these dilemmas and debates on feminist methodology, my approach to the design and analysis of the research was to afford my participants what Gill has termed 'critical respect' (Gill, 2007a). In an exchange with Duits and Van Zoonen, Gill argued:

The role of the feminist intellectual must involve more than listening, and then saying 'I see'. Respectful listening is the beginning, not the end, of the process and our job is surely to contextualize these stories, to situate them, to look at their patterns and variability, to examine their silences and exclusions, and, above all, to locate them in a wider context. (Gill, 2007a).

Feminist methodology then, in attending to the power relations inherent in the research process, must balance the power relations of the research encounter with a commitment to challenge the persistent and prolific operation of inequality in society. This also raises questions of what it means to 'speak for' others particularly as a white researcher located in the academy (Alcoff, 1995). Drawing on the important debates in feminist epistemology from the 1980s onwards, I sought to produce research that was grounded in the understanding that sexism intersects with other social inequalities such as racism, homophobia, ableism and classism (Harding, 1993). I have developed an analysis of participants' accounts in relation to social categories of oppression and privilege, with an understanding of the complexity of how such categories interact with each other in different contexts (Crenshaw, 1991). In addition to exploring inequality in everyday sex, I have sought to situate myself and the work and examine how my own social location has framed the research at all stages.

One of the key questions that has emerged from debates within feminist epistemology is the role that reflexivity can play in producing ethical feminist research (Hollway, 1989; Finlay, 2002). Reflexivity is also central to claims about the validity of data. It throws open the process of research and knowledge production for scrutiny. Reflexivity is therefore 'a resource, not a problem' (Hockey et al., 2007, p.47). As a resource, reflexivity also enables

a social constructionist analysis of data by attending to how participants' accounts are jointly produced in the research encounter. I have engaged with reflexivity as a tool to explore the process of research as one of partial and socially located knowledges throughout the design, collection, analysis and writing of my data (Haraway, 1988; Speer, 2005, p.194; Finlay, 2002). In terms of producing feminist research that is ethical in its pursuit of a political project, Haraway argues against relativism, calling instead for 'partial, locatable, critical knowledges sustaining the possibility of webs of connection called solidarity in politics and shared conversations in epistemology' (1988, p.584). The approach I have taken to reflexivity is informed by critical feminist methodological work that calls upon researchers to acknowledge and work with the unequal systems of power inherent in the research process (Skeggs, 2004a). In some social research reflexivity is presented in the form of a 'telling of the self' (Skeggs, 2004a, p.128) that appears towards the beginning of a piece of academic writing. Skeggs cautions against this approach, arguing:

This formula of self narration often presupposes that the problems of power, privilege and perspective can be dissolved by inserting one's self into the account and proclaiming therefore that reflexivity was practiced; where, in fact, it was just about talking about one's own experiences from one's own perspective. Telling and doing are two very different forms of activity. (2004a, p.128)

Skeggs argues, drawing on Bourdieu (1993), that reflexivity should be understood as a *practice* that acknowledges the power relations in the resources available for the production of knowledge, is mindful of the risks of appropriation of others' voices and that takes steps to avoid reproducing systems of exploitation. The design of the

research methods, the form of analysis and discussion of my data have all been informed by this approach. In addition, at certain points in the thesis I have included discussions of the relationships of power in the research process, and explorations of the co-constructed nature of the data. As such, my own positions and the questions and dilemmas of reflexivity appear throughout the thesis, rather than in a self-telling or description of myself as a singular, static identity (Skeggs, 2004a). I have taken this approach for the reasons outlined above, and in an attempt to position the participants' voices at the centre of the analysis.

Feminist researchers face a challenge to develop methodologies and analytical approaches that can capture the changing nature of gendered power relations. The way that power works in the construction of gender, sexism, intersectional oppressions and resistances is not static, but rather shifts over time and place (Gill, 2011b). Such changes can sometimes involve reconfigurations of more familiar meanings, as can be seen in the repackaging of feminist language of empowerment in advertising (Gill, 2007c). I have been motivated to explore a range of theoretical and methodological approaches by my concern to untangle some of the complexities of power in the negotiation of condom use. I have consequently adopted a theoretical 'eclecticism' (Maynard, 1995) in the pursuit of the best tools to analyse and interpret my data. In doing so, I am placing a drive to understand the operation of power in the everyday at the centre of my analysis, rather than a commitment to follow a single theoretical perspective. In particular, I have sought to develop a theoretical framework which enables an analysis of the everyday construction of meaning about sex while situating this within a wider understanding of intersectional power relations. I do so with an awareness of the possible difficulties of combining potentially contradictory theoretical positions, which I will discuss further below in relation to the concepts of

ideology and discourse.

My approach combines a fine-grained approach to discourse, including an exploration of what talk about condom use *does* in participants' accounts, with an exploration of how certain ways of understanding sexuality become formulated as natural or common sense. My analysis is particularly concerned with how meaning is struggled over in participants' talk and how this relates to the reproduction and resistance of wider social power relations. In the following sections, I outline the path that I have taken through conversation analytical, rhetorical, discursive psychological and ideological approaches to develop a feminist analysis that attends to the ever-changing nature of power in the negotiation of condom use.

## ***Discourse***

Following feminist work on the subject of intimate negotiations (Hollway, 1989; Gavey et al., 2001; Holland et al., 2004; Braun et al., 2003) this thesis takes the discourses of condom use as an 'entry point' (Fairclough, 2010b. p.5) for an analysis of the meaning that participants gave to both their own experiences in using condoms and their cultural representations. I have drawn particularly on feminist discursive analytic work that explores systems of meaning-making in participants' talk (Gavey, 1997; Braun et al., 2003; Reynolds, 2009) and in media texts (Gill, 2008, 2009; Lazar, 2009) and situates this analysis within a wider analysis of the persistence of gendered inequality.

## **Foucauldian discourse analysis**

The theoretical approach I have taken draws more broadly on debates within sociological,



psychological, philosophical and cultural scholarship about the relationship between power, knowledge and subjectivity. In particular, I have found Foucault's work on the relationship between knowledge, power and discourse useful in developing an analysis of how particular patterns of meaning were constructed as 'truth' in participants' accounts of their sexual experiences, and how such formations are implicated in the negotiation of power. Foucault's work posed a challenge to top-down model of repressive power, arguing for an approach that explored how particular kinds of knowledge come to be constructed:

We should not be content to say that power has a need for a certain discovery, a certain form of knowledge, but we should add that the exercise of power creates and causes to emerge new objects of knowledge and accumulates new bodies of information....The exercise of power perpetually creates knowledge and, conversely, knowledge constantly induces effects of power (1975, cited in Gordon, 2002).

Foucault's historical approach tracks the changes in the operation of power from the more top-down 'signs and levies' of feudal societies into the 'techniques of power' involved in the administration and control of the population from the seventeenth century onwards (Foucault, 2000b, p.125). These ideas about the 'micro' functioning of power (1979, 1981, 1990) have proved useful for feminist theorists interrogating the persistence of gendered inequality (Sawicki, 1991; Gavey, 1997; Bartky, 2003) and searching for sites of potential disruption of oppressive power relations (Weedon, 1987, p.21). Foucault's analysis of power has also provoked an interrogation of the changing modes of governance in operation in late capitalist societies (Miller and Rose, 2007). My work uses this conceptualisation of the relationship between knowledge and power to analyse how particular systems of knowledge and discourses about condom use relate to the production,

maintenance and resistance of gendered power relations.

Central to Foucault's understanding of the relationship between power and knowledge is a theorisation of discourse. Foucault diverged from linguistic approaches to discourse as talk, such as that advocated by Saussure, using the concept of discourse to convey systems of meaning that produce particular categories of social subject and mark out what is intelligible in social life (Hall, 2002). In particular, Foucault challenged marxist attempts to mark out 'truth' from 'ideology', focusing instead on mapping out the ways that 'effects of truth' are produced within discourses (Foucault, 2000b, p.119). This approach to discourse strikes a chord with feminist approaches to research that have long been critical of the effects of such 'truth claims' on the position of women in society, enabling a focus on how particular forms of knowledge are accorded greater authority to speak (Wetherell, 2001). This is of particular relevance to the study of condom use; for example in developing expertise in this area, the fields of public health and self-help discussed in chapter two also work to construct the 'truth' of health, disease, behaviour and identity.

Scholars are divided on the usefulness of Foucault's work for feminist empirical research. Given the characteristic that unites diverse scholarship under the umbrella of 'feminism' is a commitment to understanding and challenging gendered inequality, Foucault's formulation of power is arguably insufficient to understand the specificity of sexism, obscuring the lived experience of gendered bodies (Bartky, 2003) and the persistence of systematic gendered inequality, and failing to account for individual agency (Macdonald, 2003, p.22; Jackson and Scott, 2010). Jackson and Scott have argued that the feminist use of Foucault and a turn to poststructuralism as an approach to power and subjectivity often ignores the constructionist work of social interactionists such as Gagnon and Simon (1974), and Goffman (1969) who they argue provide tools to understand the everyday

operation of gender and sexuality. Similarly, ethnomethodological approaches to gender such as that developed by West and Zimmerman (1987) are often left out of accounts of the interactional accomplishment of gender, in favour of poststructuralist analyses that reference Butler's (2006) work. Jackson and Scott contend that feminist poststructuralist work, particularly that which draws on Foucault and traditions of psychoanalysis from Lacan, often remain in the abstract and prove difficult to use in engaging with empirical data from participants' lived experiences (2010, p.23). They go on to argue that while Foucault's concept of the productive nature of power can be useful for feminists, this dispersed formulation of power falls short when attempting to understand the way that power operates, systematically, unequally, as power *over* others (Jackson and Scott, 2010, p.36).

While I share the concerns of these feminist critiques of Foucault's theorisation of power and subjectivity, I have found 'discourse' a helpful conceptual starting point in the analysis of my data. Feminists have usefully taken Foucault's genealogical approach to the production of knowledge to explore how certain ways of thinking and being are produced and maintained at particular social and historical moments, producing analyses that connect the discursive operation of power with its material effects (for example Gavey, 1997; Braun et al., 2003; Clarke and Kitzinger, 2005; Farvid and Braun, 2006; Gill, 2009; Jackson and Westrupp, 2010). This approach combines poststructuralist theories of subjectivity and discourse with more materialist approaches to social constructionism (Fairclough, 2010b). Such research reworks the Foucauldian conceptualisation of discourse to explore participants' shifting, fragmentary subjectivities while maintaining a critique of the systematic reproduction of gendered power relations in everyday interaction and media texts. The analysis that follows builds on this work, exploring the discourses of condom use in participants' accounts of their sexual experiences. These discourses are understood

not just as representations, but to regulate the material use of condoms in participant's lives (Gavey et al., 2001, p.918; Gavey and McPhillips, 1999).

Discourse analysis takes many forms, developing not only from Foucauldian theory but also from conversation analysis, ethnomethodology, discursive psychology, critical discourse analysis and dialogical approaches following Bakhtin (Wetherell et al., 2001, p.6). A Foucauldian approach alone did not seem to provide the analytical tools to gain an understanding of *how* discourse operated in the everyday. I looked to the tools of conversation analysis (for example Kitzinger and Frith, 1999), discursive psychology (Potter and Wetherell, 1987) and critical discourse analysis (Fairclough, 2010a) to understand the contradictions and struggles in the way that condoms were constituted in the data.

## **Conversation analysis**

Conversation analysis has its roots in ethnomethodological studies of the patterns of everyday life (Speer, 2005, p.67). As such, it focuses on the detail of talk interactions themselves, analysing the specific methods of sequences, turn-taking and positioning that participants use to produce socially meaningful interactions (Speer, 2005, p.97). As Potter (1996, p.124) argues, a close or fine-grained analysis of qualitative data can capture 'precisely the level of consequential detail that often falls through the cracks between the big ideas in sociology of scientific knowledge and post-structuralism'. For example, Kitzinger and Frith's influential (1999) analysis of the common structure of refusals persuasively argued that focusing sexual violence prevention on assertiveness training for women to 'just say no' denied the fact that people rarely say no in this way in everyday life. Rather, they argued that refusals are complex, situated and interactional. They examined

data both from situational refusals and women talking about refusing unwanted sex, and posited that refusals for sex were produced in very similar ways; indirect, using pauses, and sometimes including weak acceptances. They concluded that by focusing on the role of a woman 'saying no' to unwanted sex, such prevention programmes ignore the power dynamics involved in male partners' 'claims not to understand that these women are refusing sex' (Kitzinger and Frith, 1999, p.309). They posed this argument as a challenge to the assumptions of such programmes that sexual violence was a matter of a lack of communication ability for women. Their work shows that by exploring the detailed patterns of talk, feminist conversation analysis can examine how particular relations of power are naturalised and challenge common sense assumptions about gendered inequality.

## **Discursive psychology**

In taking a fine-grained approach, I did not wish to lose sight of these 'big ideas' of Sociology (Potter, 1996, p.124) or the context of participants' words in an unequal society. Conversation analysts such as Schegloff (1998) have argued that discourse analysis must be restricted to the particular interaction of talk, focusing on the detail of participants' orientations themselves, rather than an imposition of analytical categories from 'beyond the talk' (Speer, 2005, p.102). However, I felt that limiting my analysis to the specific moment of interaction in the interview could diminish my understanding of the role of wider systems of inequality in the social construction of condom use. As such, I have drawn on the work developed in discursive psychology by Wetherell and Potter (see for example Potter and Wetherell, 1987; Wetherell and Potter, 1992), which provides a helpful synthesis between the bigger ideas of Foucauldian theory and the micro-tools of conversation analysis. This approach enables a focus on both the detail of participants' utterances and the broad 'forms of intelligibility' (Wetherell, 1998) *across* data (Gill, 2009, p.351). The

meaning of 'discourse' in this work is different to that of Foucault, referring to spoken interactions and written text (Potter and Wetherell, 1987, p.7).

Potter and Wetherell contend that talk and text should be taken as an analytical resource in its own right, rather than as a transparent reflection of internal states of attitude or belief. Their research draws on conversation analysis, ethnomethodology and semiotics to explore the way that meaning is constructed in interaction, but situates this within a critical analysis that asks 'why this utterance here?' (Wetherell, 1998). For Wetherell, discourse analysis should not stop at participants' own orientations, as it does in conversation analysis. She argues that analysts should ask *why* such orientations occur at particular moments, and how this relates to socially produced systems of meaning (1998). This approaches discourse as a form of action, in the sense that language is used to *do* things such as request, persuade, blame or justify (Potter and Wetherell, 1987, pp.32–33). Discourse not only performs these functions but also carries out wider functions such as positioning the speaker in a particular light, or constructing a specific version of events in a given context (Potter and Wetherell, 1987, p.33). The context of utterances is particularly important for discursive psychologists (Wiggins and Potter, 2008) and has an impact on what can be claimed about the data. For example, talk about sexual practices between a patient and doctor in a sexual health clinic, is likely to be *doing* something very different to talk about sexual practices between friends in a pub or between myself and interview participants for this project.

I have taken an action-oriented approach to my analysis of the discursive construction of condom use. In addition to examining *what* participants say, I have looked for patterns in the *way* that participants construct the 'truth' of condom use in their talk about sexual experiences. I examined this as a process of joint construction, between myself and the

survey respondent or interviewee, as we worked together to negotiate competing meanings about sex, identity, knowledge and power. In conducting this close reading of participants' talk, I turned to the tools of rhetorical analysis to help me make sense of the different ways that participants accounted for themselves and others.

## **Rhetorical analysis**

My analysis therefore combines a particular interest in the construction of gender with a rhetorical approach to discourse, building on Billig and colleagues (1988) work. Billig began his examination of rhetoric with an 'antiquarian' enquiry, looking back to the work of rhetoricians from ancient Athens onwards to highlight the role of argumentation in thought (Billig, 1996). Billig's work shares similarities with Bakhtin/Volosinov's dialogical approach to language and social meaning (Todorov and Godzich, 1984). In particular, Bakhtin's analysis of the contrary forces in language share much with Billig's interest in the importance of dialogue and discussion for thought and the development of ideas (1996, p.17). Billig argues:

A rhetorical approach stresses the two-sidedness of human thinking and of our conceptual capacities. A rhetorician is brought face to face with the contrary aspects of thought, and the teachers of rhetoric specifically aimed to develop a mental two-sidedness in their pupils' (Billig, 1996, p.79).

Billig contends that an analysis of rhetorical strategies used by participants such as persuasion, justification, categorisation and particularisation can shed light on competing systems of meaning or 'common sense' in society. 'Common sense' is understood in Billig's work as socially shared beliefs, drawing on Aristotle's notion of 'maxims' used rhetorically

as statements to invoke shared agreement between speaker and audience. Such common sense is situated in particular communities and changes over time. Billig argued that common sense is contrary, illustrated by the conflict between common sense maxims such as 'too many cooks spoil the broth' and 'many hands make light work' (Billig, 1996, p.236). Billig develops this point with his colleagues in their work on 'ideological dilemmas', (explored below), arguing that the argumentative nature of discourse highlights the 'contrary themes within ideology itself' (Billig et al., 1988, p.27).

I build on this approach to discourse in order to explore the production and effects of ideology in talk and text about condom use. Billig defines ideology as social beliefs and 'the social patterning of everyday thinking' (Billig et al., 1988, p.28). He contrasts everyday, lived ideology with the intellectual ideology of philosophical thought. I have adopted some of Billig's analytical tools to explore how contradictory 'truths' of condom use are constructed in participants' everyday talk, while diverging from his approach in my definition of ideology. As I outline in more detail below, I similarly conceptualise ideology as something that can be reproduced in everyday thinking, but specifically focus on systems of meaning which play a role in the maintenance or resistance to particular systems of power (Eagleton, 2007, p.223).

This focus on the importance of everyday thinking is also common among scholars influenced by the work of Gramsci (Donald and Hall, 1986a, p.xii). Gramsci argued that understanding the patterns of social ideas requires a theory of ideology which includes how political ideas become part of the 'common-sense' of ordinary people (Donald and Hall, 1986a, p.xiii; Gramsci, 1991, p.419). Drawing on this work, I have used the concepts of discourse and ideology to explore the relationship between the everyday utterances of participants, the patterns of cultural meaning they interacted with and the broad systems of



power that these were part of.

## **Critical discourse analysis**

In analysing the discourses of condom use, I have also drawn on work by critical discourse analysts such as Fairclough (2010a) and Lazar (2009), who have taken a 'transdisciplinary' approach to discourse that explores its relationship with the concept of ideology. The specifically *critical* focus of this work implies the normative analysis of the discursive aspects of 'social wrongs' and a commitment to changing society for the better (Fairclough, 2010b, p.11). My research is specifically concerned with how power operates and is maintained in everyday moments of sexual negotiation. Fairclough (2010a, p.4) argues that power and discourse are interrelated, adopting different, but dialectical elements in social process. Similarly to the discursive psychological approach adopted by Potter and Wetherell, Fairclough argues for the importance of situating discourse in its social and historical context. Critical discourse analysis does not restrict its focus to discourse 'in itself' but expands the object of analysis to the relationship between discourse and social structures, practices and events (Fairclough, 2010a, p.163). Fairclough's analysis draws on the Gramscian concept of hegemony (discussed further below) to explore how discourse and ideology interact at the level of text, interpretation and social process. He argues that while the social world is discursively constructed:

We cannot transform the world in any old way we happen to construe it: the world is such that some transformations are possible and others are not. (Fairclough, 2010b, p.5).

In approaching my data from a feminist perspective, I have taken a critical focus on the

social constraints and possibilities that frame which interpretations of condom use are intelligible, which become dominant and how participants negotiate sometimes contradictory ideologies in their accounts of their sexual experiences.

### **An eclectic, feminist approach**

Drawing on insights from these varied discursive traditions, I have taken a feminist and critical approach to discourse analysis that uses the concept of ideology to explore what particular utterances about condoms are *doing* at particular moments and how this relates to the reproduction and resistance of social power relations. I have used both the broader, Foucauldian concepts of discourse, knowledge and power and the discursive psychological concept of discourse as talk and text to analyse the structure, content and context of participants' talk. Combining these concepts with a theory of ideology requires a theoretical 'eclecticism' (Maynard, 1995; Wetherell, 1998) that is both flexible and aware of the contested nature of these concepts and the difficulties involved in combining them (Reynolds, 2009), which I discuss below.

### ***Ideology***

'Ideology' as a concept has a complex and contested history. It is employed in different ways by theorists within and across disciplines (Billig et al., 1988, p.25). Its shifting meaning and definition can be understood in the context of political and ideological debates in academic and wider political thought over the last few decades, notably in critiques of marxist theory (Eagleton, 2007). As a result of this, as a term it can be 'elusive' (McEllan, 1986, cited in Billig et al., 1988, p.25) and slippery to define. Eagleton argues that this elusiveness results from its 'range of useful meanings, not all of which are

compatible with each other' (Eagleton, 2007, p.1). The term encompasses questions of social power, politics, epistemology and truth (Eagleton, 2007). This thesis does not have space to debate all of the different formulations of ideology in philosophical and political thought, this is something that has been done by many scholars elsewhere (see for example Donald and Hall, 1986b; Barrett, 1991; Eagleton, 2007), and is an ongoing project of knowledge. However, I will briefly outline the theoretical traditions which I will be drawing on in using the concept of ideology and explain why this is a useful term for the study of the negotiation and representation of condom use.

The theoretical debates about the usefulness of the term 'ideology' centre mainly around critiques of Marx's theory of ideology. This provides a challenging starting point. Marx's understanding of ideology, developed initially with Engels in 'The German Ideology' was theorised at the level of general abstraction (Donald and Hall, 1986a, p.xv) and marxist theorists differ in their interpretations of what Marx said, or intended to say (Barrett, 1991, p.3). Two central questions that need to be considered in combining an analysis of discourse with ideology are the relationship of ideology to truth, and the relationship of ideology to the structure of class relations. Foucault argued that one of the reasons he did not make use of ideology as a concept was its positioning in marxist thought in opposition to 'truth' (Foucault, 2000b, p.119). Central to Foucault's archaeological project of mapping 'truth effects' was a critique of the notion that there existed some form of external 'truth' that could be identified in analysis (Barrett, 1991, p.139). This formulation of marxist theory relates to the notion that ideology is 'distortion' (Hall, 1986). Stuart Hall has argued persuasively that an understanding of ideology as 'distortion' does not require this to be equated with it being 'false' (Hall, 1986). Rather, 'distortion' can be read to imply that knowledge produced in particular circumstances is not always the 'full picture'. He gives the example of those who come into contact with 'the market' as consumers seeing only

their part of the process of capital flow – without seeing for example the process of production that is out of sight. Hall re-reads this as the existence of different 'systems of representation' used to express the same social process (Hall, 1986). Eagleton shares a caution towards 'the suspiciously narrow idea of the deployment of false ideas in the direct interests of a ruling class' but maintains, like Hall, the value of considering the role that *distortions* of ideology can play in the naturalisation of oppressive systems of power (Hall, 1986, p.34; Eagleton, 2007, pp.221–2).

Secondly, one of the major points of contestation in debates about ideology have related to the formulation of it being the product of particular class positions, leading to the notion that the material conditions, or economic base in society lead directly to the structure of ideology (Donald and Hall, 1986a, p.xv). This theorisation of the dominant nature of ideology in marxist thought can be summarised with the well-quoted phrase that 'the ideas of the ruling class are in every epoch the ruling ideas' (Marx and Engels, 1970, p.64). This conceptualisation of ideology has been widely critiqued as being a form of 'economic determinism' (Hall, 1986). However, as discussed above, Hall and others have argued that while a critique of economic determinism is worthwhile, such a critique does not require abandoning the concept of ideology, or its relation to class positions altogether. Donald and Hall posit that Marx and Engels' theorisation of ideology was not intended to provide a detailed analysis of the operation of ideology in everyday life (1986a, p.xv; see also Hall, 1986) or be endowed with 'law like status' (Hall, 1986, p.29). Hall illustrates that critiques such as those made by Laclau and Mouffe (for example 2001) have usefully challenged the notion that class position *determines* ideas, but argues against the notion that ideology and discourse are 'free floating' and bear no relation to material conditions in society. He argues rather that material circumstances create a 'net of constraints' within which social groups and classes are able to think and act (Hall, 1986, pp.41–42).

Social and cultural theorists such as Hall have found the work of Gramsci (for example 1991) useful in developing an understanding of the complex ways that ideas come to be taken up by mass populations in society. Gramsci theorised the emergence of ideological ideas by developing the concept of 'hegemony' to explain the way that power in society is gained through *consent* and not just violent force (Macdonald, 2003, p.32; Davis, 2004, p.46). Gramsci argued that there was a struggle over the ideas that make up the 'common sense' that people existing in different class positions draw on to make sense of their everyday lives (Gramsci, 1991). Hegemony as a concept is therefore used as a way of theorising the relationship between classes, rather than as a form of static power that one part of society holds (Davis, 2004, p.46). This concept has been used in particular by theorists in exploring the role of culture, language and meaning in the maintenance of inequality. As such, ideology as a concept is useful in exploring how particular ideas become dominant in society, and how challenges to these ideas emerge (Hall, 1986, p.29).

This relates importantly to Foucault's concept of power, discussed above. He was critical of what he saw as overly deterministic models of ideology from marxism. He argued that:

If power were never anything but repressive, if it never did anything but to say no, do you really think one would be brought to obey it? What makes power hold good, what makes it accepted, is simply the fact that it doesn't only weigh on us as a force that says no; it also traverses and produces things, it induces pleasure, forms knowledge, produces discourse. It needs to be considered as a productive network that runs through the whole social body, much more than as a negative instance whose function is repression (Foucault, 2000b, p.120).

An analysis of the operation of 'common sense' in society can usefully combine the insights from Foucauldian theory about discourse, knowledge and power and those of more materialist accounts of the constraints within which discourses are constructed and contested. As discussed in the previous chapter, sexual negotiations have been widely theorised by feminists as constrained by and implicated in gendered power relations. In foregrounding participants' own accounts of their experiences, I did not want my analysis to lose sight of the conditions which make such accounts possible or intelligible, nor suggest that participants' experiences were entirely determined by their circumstances. As Billig argues:

Individuals, when they speak, do not create their own language, but they use terms which are culturally, historically and ideologically available. Each act of utterance, although itself novel, carries an ideological history (Billig, 2001, p.217).

In the rhetorical work conducted by Billig, outlined above, the term ideology is used in a broad sense to mean the processes of everyday thinking and meaning-making (Billig et al., 1988; Reynolds, 2009, p.19). However, while such a formulation of ideology allows for close analysis of the way that meaning is contested and negotiated in participants' talk, it falls short, in a similar way to conversation analysis as critiqued by Wetherell (1998) above, in enabling an understanding of '*why* this utterance'; why this discourse here? A theory of ideology, as Macdonald has argued, should provide tools to understand how particular discourses are implicated in the maintenance of inequality, and from a feminist perspective, examine sites of potential material change (2003). The rhetorical psychological approach to ideology seems to shift its definition to the other end of the deterministic spectrum to marxist analyses, in which *all* contestation in discourse can be

understood as ideological (see Billig et al., 1988; and for a critique of this position Eagleton, 2007). I have found it analytically useful to draw on Hall (1986) and Eagleton (2007) in understanding the relationship between ideology and discourse, not as infinitely multiple, but rather operating within the constraints of material life, and playing a role in forming social life.

The concept of ideology can be usefully deployed with discourse to:

disclose something of the relation between an utterance and its material conditions of possibility, when those conditions of possibility are viewed in the light of certain power-struggles central to the reproduction (or also, for some theories, contestation) of a whole form of social life (Eagleton, 2007, p.223).

One approach to such analysis taken by critical discourse scholars theorises the relationship between ideology and discourse as one of both the structure of utterances and their content. For example, analysis of the turn-taking conventions of a classroom or office meeting reveal something of the ideological representations of hierarchies in those institutions (Fairclough, 2010a, p.60). An analysis of the content of discourse, in terms of patterns of words used, metaphors and so on can also be used to explore the operation and construction of ideology. For example the representation of unemployment as though it were a natural disaster; 'millions are out of work' has different ideological effects to the utterance 'firms have sacked millions' (Fairclough, 2010a, p.60). The analysis in this thesis therefore uses the concept of discourse to explore both the micro operation of talk and text and broader systems of meaning in the Foucauldian sense. Whether or not particular Foucauldian discourses, or the analytical objects of discourse are *ideological* is explored in how far they can be said to produce *ideological effects* – that is, maintain or challenge

systems of power and inequality.

I approach ideology and discourse from the perspective that the way that ideologies are produced, taken up and contested is dynamic and shifting (Gill, 2011b) rather than fixed or predetermined. For example, the ideological context of discourses about HIV risk in the UK have been markedly different before the advent of AIDS, at the height of sexual health messaging about HIV in the 1990s and now, after the development of antiviral treatment. In addition, the meanings associated with condoms are culturally contextual. For example as noted in chapter one, discourses of condom use in US debates about abstinence and sex education have a different political history to the construction of condom use in UK public health discourse. These differences cannot be straightforwardly contained within geographical locations, however. The globalisation of information and communication, particularly through online and mobile technologies can be understood to blur these cultural sites of meaning as abstinence videos are forwarded across continents, activists share resources and the policy decisions of powerful nations impact health provision and discourses of health worldwide (Hirsch et al., 2009, p.8).

In combining the approaches to discourse and ideology outlined above, I have sought to explore the way that meaning is constructed in participants' talk, analyse patterns of meaning across participant and cultural texts and explore in particular those forms of discourse which have a bearing on the reproduction of social power relations. For the concept of ideology to be analytically useful in understanding the operation of inequality in the everyday, it must account for the persistence of particular *kinds* of power, and from a feminist perspective, for the persistence of gendered inequality. While such a project does not fit easily with Foucault's analysis of the diffuse relations of power in society, I would argue that the analytical tools developed from his theories and those of rhetorical and



discursive psychology can be employed to understand the operation of power in intimate life.

## ***Analytical methods***

I have drawn on discursive psychological work on talk-in-interaction to explore the accounts that participants gave of their sexual experiences and their engagements with media, and in analysing a case study of a media text referred to by participants in their interviews. There is a great deal of debate within discursive scholarship about the analysis of interviews rather than 'naturalistic' data from everyday interactions (such as interactions in calls to an emergency helpline or interactions in a classroom) (Wiggins and Potter, 2008). Speer questions this distinction, arguing that while 'non-directive' or 'participant-centred' approaches to data collection undoubtably produce different data to that occurring in more directive settings, such as semi-structured interviews, *all* data are mediated in some way by the researcher, and thus all analysis must be mindful of the context in which the data were produced (Speer, 2005, p.194).

Aiming to get at less 'contrived' data, researchers can attempt to remove themselves, in part at least, from the method of data collection (Speer, 2005, p.194). There are a number of challenges posed by researching condom use in this way. Firstly, the ethics of observing condom-negotiation-in-action in participants' everyday lives would be questionable. Secondly, as Speer (2005, p.193) points out, talk about sex might not occur often enough in everyday interaction to enable the use of 'non-contrived methods'. This certainly seems to be the case with social talk about condoms. Even in the process of conducting this doctoral research, I have noticed that the introduction of the word 'condoms' into social conversation can provoke embarrassment, laughter and surprise (see also Braun, 1999). It

seemed to me that in order to explore the meanings participants give to condoms, I would need to design methods that specifically elicited talk about the issue of sex and condom use. This 'topic talk' (Speer, 2005, p.193) is clearly not the same as the negotiations that participants engage in with partners about condom use. However it does tell us something about the social and cultural resources participants draw on when describing their experiences (Gavey and McPhillips, 1999). Speer argues that even when researchers attempt to minimise their role during data collection, it is not possible to 'disinfect our data of the researchers presence' (Speer, 2005; Speer and Hutchby, 2003). Rather than attempt to remove the researcher (or deny my presence), I set out to design methods that acknowledge and analyse the ways that I interacted with and co-produced participants' accounts (Speer, 2005). As Ramazanoglu and Holland (2002) have argued, such a commitment produces a further dilemma for feminist researchers. While critical of foundational theories and the ways that they have historically excluded women's experiences under the guise of 'objectivity', feminists still need to engage in producing knowledge that is considered valid by the academic community and beyond.

One of the ways to attend to this is to develop reflexive accounts of the way that participants' accounts are produced in the research encounter (Speer, 2005). Speer argues that feminist conversation analysis enables an understanding of the operation of the 'interactional contours' of research encounters and the impact that researchers have on participants' accounts. Commonly with conversation analytical approaches. Speer argues that what can be claimed from the data must be limited to the context of its production – therefore participants producing particular kinds of accounts in a research encounter must be understood as that and not taken as evidence of how such talk occurs in other settings. My approach to discourse analysis is concerned with how condom negotiation is constructed socially – how sexual practices are accounted for, justified, and socially

produced through discourse. As I have argued above, while I have taken a detailed analytical view of interview, open ended survey and media data, I have also sought to explore patterns across these texts and linked my analysis to a wider understanding of the discursive and ideological context in which the utterances and representations are made. The analysis that follows in this thesis has found that the negotiation of condom use is a complex set of social practices, rather than simply an in-the-moment activity. The stories that participants tell are combined in this thesis with an analysis of the publicly available stories that people draw on to make sense of their experiences (Reynolds, 2009, p.12) such as those found in magazines, pornography, in online communities and on television.

As outlined above, my approach follows 'a synthesis of traditions' (Reynolds, 2009; Wetherell, 1998) of insights from Foucauldian, conversation analytical and discursive psychological approaches to discourse analysis. This approach frames discourse as the spoken meaning-making practices that participants engage in, taking a fine-grained approach to what participants say, how they say it and what is left unsaid. I have used three central concepts in the analysis of my data, developed from the discursive psychological work discussed above: 'interpretative repertoire', 'ideological dilemma' and the processes of categorisation and particularisation.

### **Interpretative repertoire**

Potter and Wetherell developed the concept of 'interpretative repertoire' building on Gilbert and Mulkay's (1984) analysis of scientific discourse (Edwards, 2012). Interpretative repertoires are 'recurrently used systems of terms used for characterizing and evaluating actions, events and other phenomena' (Potter and Wetherell, 1987, p.149). As a conceptual tool, the interpretative repertoire enables identification and analysis of contrasting systems

of meaning that participants use to make sense of the social world and how this is accomplished in talk. A discursive analysis can therefore look for the way that participants use particular systems of terms to account for themselves, and analyse the social function that their use performs, such as justifying particular behaviours. The identification of these patterns across talk enables an analysis that links participants' utterances to 'the broader ideological and historical formations in which those practices are situated.' (Edwards, 2012). In identifying interpretative repertoires, the discourse analyst looks not only for patterns of meaning, but for the status of such systems as 'common sense' or 'naturalised' in participants' talk (Wetherell, 1998). Wetherell (1998) suggests that a useful way to begin the identification of interpretative repertoires is to explore *variability* and *contradictions* in participants' accounts. She argues that discursive activities such as describing, justifying and evaluating events offer sites for analysis as participants draw on socially shared meanings to construct different versions of reality. The question, for the discourse analyst in these moments, is therefore 'why this (different) formulation at this point in the strip of talk?' (1998).

My analysis of interpretative repertoires began with a close reading and re-reading of both the interview transcripts and open-ended questions from the survey data. I began by identifying thematic patterns across all of the data, recoding the survey data and interview transcripts as I found new themes, in a method similar to that adopted by grounded theory (Strauss and Corbin, 1998; Edwards, 2012). These themes were developed from an analysis of the whole dataset. As I categorised these themes I tracked patterns in the way that people constructed their accounts of sex, focusing in particular on accounts of using and not using condoms. These patterns emerged across both interview and survey data. I looked for moments of tension and conflict in participants' accounts – these were often the moments in which participants would engage in discursive activities such as blaming and

justifying. I then took a more detailed, longitudinal look at each interview participant, drawing up 'case summaries' of the key narrative points and marking points of variation in participants' accounts. I examined the 'occasioned and contextualised nature of participants' talk' (Reynolds, 2009, p.46) in interaction with my own talk, as interviewer. Then I took a fine-grained approach to these moments of variation, exploring the context within the interview or open-ended question and the discursive *work* that the account was doing in each moment, examining what resources participants were drawing on in each instance. The discussion throughout the thesis sometimes presents examples from both interview and survey data, with the source of each extract labelled. While the discussion does not *always* present examples from each data source, it is important to note that the analysis of interpretative repertoires from which it is drawn is based on a thorough exploration of the data from both interviews and surveys.

### **Ideological dilemma**

In this more fine-grained analysis I found the concept of 'ideological dilemma' useful in exploring the argumentative nature of participants' accounts of condom use. This concept, developed by Billig and colleagues, points to the contrary nature of 'common sense' looking to dilemmas in participants' talk as resources to understand the way that participants orient to broader ideological patterns (Speer, 2005). Billig argues that the presence of argumentation and justification suggests that the speaker is taking 'a stance in a matter of controversy' (Billig, 1996, p.2). He argues that in thought and talk, 'the various elements of common sense are seen to collide in a way which on occasions necessitates difficult decisions' (1988, p.16). As such, a focus on such moments of contestation in participants' talk can highlight the contrary patterns of common sense in everyday thinking as participants stake out their position in matters of social controversy and criticise

opposing positions (Billig, 1996). After identifying the moments of variation within and across participants' talk, I analysed the rhetorical strategies participants used to account for their sexual experiences. In this process, patterns began to emerge in terms of the resources participants drew on at different sites of dilemmas.

For example, I identified a particular rhetorical strategy participants were using in describing and justifying *not* using condoms, which I called 'the safer sex disclaimer'.

Disclaimers have been analysed as a rhetorical device that serves to deflect criticism of the speaker (van Dijk, 1992; Billig, 1996, p.269). The example often given of disclaimers is the use of phrases such as 'I'm not racist' before statements that would be socially perceived as racist (van Dijk, 1992). Disclaimers about safer sex clearly have quite different political implications than the denial of racism examined in van Dijk's (1992) discursive work.

However, this work is useful in that it deconstructs the function that disclaimers carry out in positioning the speaker in a particular light. Van Dijk (1992, p.90) argues that in presenting a disclaimer, a speaker attempts to differentiate what might be perceived as a negative opinion (for example about an individual member of a minority ethnic community) from a more general negative attitude to a particular issue (for example against an entire community). As Billig (1996) points out, one of the functions of a disclaimer is to find common ground and identification with the speaker's audience. In that sense, the disclaimer as a concept provides a tool to explore the normative construction of condom use, how participants are orienting to this subject, what particular 'shared' understanding of condoms and sex are considered to be, and what count as intelligible justifications for particular kinds of sexual behaviour. The safer sex disclaimer usually took the form of a statement about the participant's recognition of the social value of condoms or knowledge about safer sex, followed by an account in which they spoke about not using them or disliking them. For example:

### **Extract 3.1**

'I understand the importance of them but I think they spoil the fun'

(Survey, O, f, mid 20s, het, WE)<sup>2</sup>

The structure of this is slightly different to disclaimers such as those found in racist talk. Participants did not tend to actively deny disliking condoms (for example by saying things like 'I don't hate condoms but..'). However I would argue that a statement like the one above *functions* rhetorically as a disclaimer, with a similar action in defending the speaker of criticism by expressing an 'expected' view alongside an opinion that has the potential to be negatively received by the audience.

After identifying examples of disclaimers in both survey and interview data, I explored the discourse around these disclaimers to analyse what was going on in these moments. I found that the safer sex disclaimer appeared to serve the function of enabling the participant to occupy a position of knowledge (and consequently sexual safety) alongside apparently conflicting statements about their sexual experiences, attitudes and behaviour. I looked closely at the data to interpret *why* a disclaimer might be considered necessary in these moments, and *how* this disclaimer was supported with additional justifications. I looked for patterns in these moments and connected this to broader patterns I had found in my thematic analysis. I repeated this with different rhetorical strategies participants used in their accounts including blaming, justifying, categorisation and particularisation (Billig, 1996), mapping out areas where particular systems of terms were used.

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2 Demographic information for participants is abbreviated listing location, gender, age, sexuality and ethnicity. Please see appendix and chapter five for a more detailed account of the data sample and explanation of the abbreviations.

## **Categorisation and particularisation**

In exploring how participants managed moments of ideological dilemma in their accounts, I identified a pattern of the use of categories to justify the use and non use of condoms.

Billig has argued that paying attention to the way that people use categories can be a useful method for the discourse analyst (Billig, 2001). Discussion or argument about categories can highlight points of ideological contestation, and draw attention to the taken-for-granted assumptions that make up the common sense of a particular moment (Billig, 2001, p.220).

By placing things, actions, or people into categories, Billig argues that people and groups are often evoking histories of struggle over meaning, or taking a position in a point of controversy. For example, the struggle over the types of relationships that are able to be categorised as 'marriage' in a number of national contexts evokes long histories of struggle over meaning that draw on religious, cultural and political discourses. In terms of my own interests in the negotiation and representation of condom use, a detailed examination of what is going on when participants use categories, what justifications are used and what is left unsaid, enabled me to explore how participants' talk about condom use relates to wider systems of power and inequality.

Categorisation has been an important unit of analysis for social psychologists, particularly those from a cognitive tradition (Billig, 1996; 2001). In a cognitive approach, categorisation is conceptualised as a unit of thinking that serves an important function for people to differentiate the multiple stimuli they encounter and make sense of the world around them. However, Billig takes a slightly different approach, examining the use of categories from a rhetorical perspective. He argues that, unlike animals, people have the ability to discuss and reshape the categories they use to make sense of the world through



argumentation:

Humans, through their use of language, possess that most important capability which makes rhetoric possible: the ability to negate. It is not just that we have different categories which we can apply to things: but we can argue the merits of categorizing one way rather than another. One category can be placed in opposition to other potential categories. This opposition of categories might then be a matter for justification and criticism (Billig, 1996, p.165).

A rhetorical approach therefore highlights the possibility that the selection of categories, the drawing of their boundaries and what is included or excluded can be contested, and that such contestation is historically and socially specific. In exploring this process of contestation, Billig (1996) developed the opposing concept of 'particularisation' as a way of understanding how certain things are withheld or removed from categories. Billig theorises these two processes as interrelated. He contends that the argumentation that happens around this process can focus either on discussing the thing which is being categorised (for example, two women holding a ceremony to celebrate and recognise their relationship) or the category itself (marriage) (Billig, 1996, p.171). A rhetorical analysis can therefore focus both on the construction of the categories themselves, and the rhetorical strategies used to explain why a particular thing fits in a particular category (or does not).

A focus on the fine-grain of how participants construct, for example, particular subjects as 'risky' in terms of sexual health enabled an analysis of how socially intelligible behaviour, attitudes and subject positions were constituted across the data. The data were surprisingly patterned, with a number of common sense discourses about condoms appearing across the

survey and interview data. Through this iterative process I developed an analysis of interpretative repertoires that participants were using to make sense of sexual life. In identifying these systems of meaning across the data, I looked to the Foucauldian concept of discourse outlined above to analyse whether these systems reinforced or challenged culturally identified systems of meaning about condom use in existing empirical data on sexual negotiations. I analysed these systems of meaning to explore whether and how they were implicated in producing or sustaining particular 'regimes of truth', drawing on work following Foucault on governmentality, particularly the work of Miller and Rose discussed in chapters two and five (2007). In doing so I sought to pick apart the complexity of how ideology and power are reproduced in social life. Rather than consider *every* utterance or interpretative repertoire as ideological, I drew on a more materialist account of ideology to look specifically at how *particular* repertoires might be implicated in the material reproduction of power, particularly gendered power relations. My approach was 'eclectic' in the sense of combining insights from a range of theoretical perspectives and analytical tools, and rigorous, grounded in a micro analysis of participants' talk and its relation to patterns of social inequality (Wetherell, 1998).

The three interpretative repertoires I identified were the 'care of the sexual self', 'the moment' and 'risky subjects'. In the 'care of the sexual self' repertoire, analysed in chapter five, condoms were presented as necessary items for *protection* for the self or partner from unwanted pregnancy, sexually transmitted infections and HIV. In addition, participants used an interpretative repertoire of 'risky subjects' to position themselves and others in categories of risk related to sexual health or pregnancy when discussing their experiences of condom use. This is analysed in chapter six. Competing with these discourses of care and risk was an interpretative repertoire of 'the moment' in which condoms were presented as incompatible with the 'common sense' characteristics of 'good sex' – in that they 'spoil

the moment', reduce pleasure, force the participant to think about the possible negative outcomes of sex, encourage a particular script for sex, cause discomfort or are difficult to use. I explore this repertoire in chapter seven.

## ***Conclusion***

In this chapter I have outlined the feminist 'eclectic' methodology I have taken in my research. I have argued that a theoretical approach that attends to the operation of power in the everyday is necessary to make sense of the social construction of condom use. I have argued that the concepts of ideology and discourse are useful in combining a fine-grained analysis of participants' experiences of condom use and the representation of sex and condoms in media texts with an understanding of the broader social relations in which they occur. I have drawn a path through the complex histories of 'discourse' and 'ideology' as analytical concepts, arguing that combining them provides a productive framework for exploring questions of power, inequality and resistance in intimate life. I have laid the analytical foundations that I will build on in the empirical chapters. However, concepts alone are not enough to provide the tools of empirical analysis. In the next chapter I will discuss the methods I used to collect the data, and some of the methodological dilemmas I faced in doing so.

## Chapter 4: Methods - collecting fragments of sexual life

The apparition of these faces in the crowd;

Petals on a wet, black bough.

Ezra Pound (2004, p.833)

This research is concerned with fragmentary moments of sexual life. I did not set out to measure, categorise or predict participants' sexual behaviours, as many researchers in this field have done before. I wanted to explore the meanings given to condom use by participants from a range of different social and cultural backgrounds. I designed methods that would explore the qualitative aspects of condom use, the patterns in the language participants used to account for their experiences, and would find out how they engaged with representations of condom use in the media. My data consist of 212 surveys collected online and via hardcopy, 46 interviews involving 26 participants and a case study discourse analysis of an episode of *The Jeremy Kyle Show*, which was selected on the basis of participant interviews. All interview participants were asked to keep a private sexual encounter and media diary and bring this to a second interview, approximately six months after the first. The data collection was undertaken between February 2010 and August 2011. I used a convenience and snowball sample to recruit participants in two locations in England: Oldham and London. These sites were selected to construct a diverse<sup>3</sup> sample of

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3 In this thesis I use the terms 'diverse' and 'diversity' in relation to my sample to refer to variation across the demographic categories of 'race'/ ethnicity, class and sexuality. In UK social policy, the term 'diversity' is often used to refer to policies that relate to inequality, in particular 'inclusion' in response to racism (Woodward, 2007), homophobia (Hannah & Douglas-Smith, 2008) and ableism (Jaeger & Bowman, 2005). As such, the term has political connotations. However, I would argue that this remains a useful term to describe demographic variation within a population or research sample.

participants from different social backgrounds, discussed below. In this chapter I discuss how I designed and used these methods, suggest some of their advantages and limitations, and reflect on some of the methodological dilemmas I faced during the project.

## ***The sites***

Oldham is a town situated in Greater Manchester in the North West of England. The textile industry which dominated Oldham from the 18<sup>th</sup> century has left its mark in the mills on the landscape surrounding the town. The Indices of Deprivation in 2007 reported that 23.1% of households in Oldham were income deprived (Oldham Partnership, 2010). The town's population are from a diversity of ethnic backgrounds, in particular white British, Pakistani and Bangladeshi. Oldham was the site of violent disturbances in 2001, when both Asian and white young people clashed with police and each other, leading Oldham to become associated in cultural narratives in the UK as a 'riot town' (Jones, 2011). Jones argues that many people who live in Oldham have become frustrated with this narrative (Jones, 2011, p.203). This was a sentiment that was echoed by some of the people I spoke to as I distributed my questionnaires. I selected Oldham in order to include a greater diversity of participants in my sample, including differences of geography.

Oldham is much smaller than London and is situated between urban and rural areas. While Manchester is a short bus journey from the centre of Oldham, the town feels quite separate and has its own identity. A number of participants were surprised that I had chosen Oldham as a site for research about sexuality. This contrasts with the experience of Jones (2011), who found that her participants were unsurprised that she was conducting fieldwork about community cohesion in Oldham. In my field notes I reflected on the ways that people and

sites are constructed as worthy of research, and how I was positioned as a researcher in that process. Both in London and Oldham when I mentioned the two geographical sites my study was focusing on, I was met with the question “why Oldham?”. No-one asked me “why London?”. Researchers such as Janice Radway (1991) have explored the power operating in the ways that certain subjects, places or people are considered worthy of research, while others are considered trivial or marginal. In these encounters Oldham was constructed as an unusual site for sex research.

In the recruitment in Oldham I was aware of the historical, social, economic and geographical context of a 'north/south divide' in England, brought even more into focus by an art exhibition I attended at Oldham library during my fieldwork which critiqued the history of 'outsiders' visiting the north of England to take pictures of cobbled streets, mills and men in flat caps to capture a sense of it being 'grim up north':

When you think of the North what images come to mind? Is this the biased image reinforced by visiting photographers? Do photographers born and working in the North fall into the same visual traps? This exhibition includes images by a selection of visiting and indigenous photographers. Is there a difference? There is a strong tradition of documentary photography in England. Part of that tradition is for aspiring photojournalists to head north eager to find bleak industrial ruins and penniless unemployed workers. In the tradition of the imagined geography of “it's grim up north” they follow in the footsteps of Humphrey Spender and Bill Brandt (Beesley, 2010).

I questioned my role in this process as an 'outsider researcher' not living in the area, and found myself positioned by participants in different ways depending on the encounter – in

Oldham I was heard as 'posh' and 'not from round here'. I was constantly questioned about why anyone would write about Oldham, participants told me repeatedly that “no-one round here would know what a condom was”, despite the very heavily used Brook and Connexions centres I passed every day.

I chose London for both convenience and diversity. I restricted my recruitment to participants living and working in London, which I limited to the more central boroughs of Lewisham, Hackney, Westminster, Camden, Tower Hamlets, Southwark, Lambeth, Kensington and Chelsea. These boroughs are diverse in terms of ethnicity and class, with Hackney and Tower Hamlets two of the most deprived boroughs in the country (Indices of Deprivation, 2011). Interestingly, my focus on sex research was not constructed by participants or gatekeepers as unusual in the different sites I visited in London. For example, one sexual health doctor I spoke with in South London contextualised my research in relation to the high levels of teenage pregnancy in his borough, constructing the people living in the area as in need of research and policy intervention. As I discuss in chapters two and six, research on sexual negotiations can play a role in the construction of 'risky subjects' such as those from particular class, national or ethnic backgrounds. Thus I was mindful of conducting ethical research in this area of high sensitivity. I will next discuss how I dealt with these ethical questions, then explain in more detail the methods I used to recruit participants.

### ***The ethics of researching sex***

Ethics has importantly become a central concern for researchers working with human participants, with procedures, ethics committees and protocols in place to ensure that participants are fully informed, given privacy and confidentiality and that researchers

design research that will not harm their participants. The research was designed and carried out according to the following published ethical guidelines and was approved on 1<sup>st</sup> February 2010 by the Open University Human Participants and Materials Ethics Committee (HPMEC):

- BPS Code of Ethics and Conduct;
- BPS Guidelines for Minimal Standards of Ethical Approval in Psychological Research;
- The Open University Principles for Research with Human Participants;
- Hewson (2003) Conducting research on the internet. *The Psychologist* 16(6).

All participants were given an information sheet with an explanation of the research (see Appendix F). Survey participants were required to tick a box on the survey to indicate that they had read the information, were over 16 and consented to take part, and interview participants were asked to sign a consent form at the first interview (see Appendix I). Participants were informed that they could withdraw from the research up to three months after their final interview.

Sexuality is an area of particular sensitivity for research. Exploring condom use requires inquiring about some of participants' most intimate moments. These moments might be mundane, comical, painful to remember or pleasurable to think about. Ethics in this sense requires planning for research that will avoid harm to either the participant or researcher. This includes ensuring that ethical approval and informed consent are gained, but is also crucially about adopting an ongoing sensitivity and dialogue with participants. I did not consider the signature on the consent form to be the end of the process of consent, but rather approached it as something that should be negotiated on an ongoing basis. This



involved thinking carefully about the impact that taking part could have, including after the research. For example, one of the participants said at the end of our second interview that he had found talking about some of the difficult things that had happened in his life over the diary-keeping period useful but that this had also left him feeling quite fragile, so he asked for advice about someone to talk to. As outlined in my ethical protocol, I consulted with expert opinion in the department to signpost him to relevant services in his local area. Suki Ali has reflected on the complex relationship between trust, ethics and power in interviewing, as researchers record the intimate 'secrets' of participants. At the end of her fieldwork a child wanted Ali's home number, asking 'who am I going to talk to when you go?'. Ali discusses the importance of ensuring that researchers do not present themselves as 'friends', but make clear that they are a researcher and that the amount of time that they are able to spend with participants is finite (Ali, 2010). Similarly, the power dynamic of interviews with adults can present itself as something like therapy. I was mindful of this dynamic, and while sympathetic to participants, made sure that they understood that I was not a therapist. The disclosures participants make during interviews about their intimate lives could be understood as a site of power through confession (Foucault, 1981). The researcher adopts a position of relative power as they design the research, choose the questions and coax responses from their participants (Plummer, 2003). However, the research encounter can also be understood as a 'therapeutic opportunity' (Birch and Miller, 2000) as participants can gain understanding about their experiences. As a researcher I was mindful that this process could be interesting for participants, but also painful. As participants were also using diaries in this research (discussed further below), this added a further dimension of 'confession'.

I was aware from my previous pilot work on condom negotiation in heterosexual that keeping a diary could have an impact on participants' intimate lives (Harvey, 2011). Indeed, in our

second interviews some participants talked about the role the diary had played as a prompt for conversations about sex with partners, documenting particular moments in their lives, and in one case being involved in an argument with a partner about previous sexual experiences:

***Extract 4.1***

Sian: 'the alternative title for this interview should be I'm not saying that keeping the sex diary ruined my life but [LH: oh god] ((laugh)) it's been very interesting'

(Interview, L, f, late 20s, het. WB)

The ethical considerations of this research therefore begin at the design of the research, in which I attempted to allow participants a reasonable amount of control over the construction of their narratives and disclosure. This follows through into the analysis, in which I have stressed that excerpts or themes from participants accounts cannot be completely removed from their context and should be understood as snapshots in participants' lives. In addition, stories about sex are often relational accounts, in which other people feature, sometimes in great detail. I have taken care to ensure that both the participants and their partners have been anonymised, including removing references to specific countries, counties or online communities, replacing these with descriptions instead.

Finally, the writing of research is by its nature (and time constraints of both the writer and reader) limited. Participants' stories are woven into analyses that give the semblance of coherence amongst the messiness of experience, struggles and materiality of bodily feelings, pain, pleasure, fear and anger. I have attempted to be faithful to this messiness, but any form of analysis that attempts to make sense of the social world necessarily

searches for order in chaos. My research design has followed quite a conventional structure in the sense that as the researcher I have identified the research questions, designed the methods and carried out the data collection and analysis myself. I have sought to design and carry out the methods in such a way that participants could collaborate in the construction of their meaning, through open-ended interviewing and access to transcripts. However it is important to note that the analysis is *one* interpretation, rooted in my particular disciplinary, epistemological, social and cultural context. One of the benefits of the fine-grained approach I have taken is that the 'workings' of the analysis are rooted in the discursive data, and so the conclusions can be open to scrutiny for their validity (Speer, 2005, p.192). The specific ethical considerations for each method are discussed in more detail in the accounts of each method, below.

### ***Giving sweets to strangers: surveys as recruitment***

This thesis has taken an exploratory and interpretative approach to the subject of condom use. My question, and the analysis from the question, seek to explore the meaning participants give to condoms, and how they relate the representations they see in the media to their everyday lives. I used a questionnaire (see Appendix G) to gather data about what participants think about condoms, their main reasons for using them, where they got their information about sex from when they were young, and where they get their information from now. The questions were developed from existing research on condom use, as discussed in chapter two. I used a combination of category, scale response, closed and open-ended questions. The data were coded alongside the qualitative data from the interviews. The open-ended questions yielded richer, much more relevant data in terms of answering the research questions I set out in chapter one than the closed and scale questions I included. I used the results from the quantitative data to inform my analysis of

the qualitative data, in particular in exploring the diversity of participants' use of media. However the majority of the analysis that follows draws on discursive data from the interviews, open-ended survey questions and the media case study.

In approaching my project from an interpretative, social constructionist framework, I was not seeking to make generalisations from the sample to the entire population, or predict behaviour based on my data. I therefore decided to use a convenience sample and snowballing at both sites to recruit participants for both the survey and interviews. I distributed questionnaires online, through a facebook group and website (see Appendix H), through hard copy distribution in workplaces, in local community spaces in cafés, pubs and fast food restaurants, sexual health clinics and universities. I publicised the research, including posters with tear-off sheets with the website address and my contact details in local sixth-form colleges, universities, sexual health clinics, cafés, bars, shop windows and workplace staff rooms (see Appendix J). I publicised the research online though trade union and voluntary sector contacts. I also placed an advertisement in the local newspaper in Oldham. 'The Oldham Chronicle'. I ensured that where questionnaires were being distributed by hand, they were only distributed to participants who appeared over the age of 16. I therefore chose sites that would be most likely to have participants of that age. I have not listed the names of specific workplaces to protect anonymity of participants.

**Table 1 – Survey sample exclusions**

Total survey responses	246
Excluded by geographical area	26
Excluded by age	8
<b>Total sample</b>	<b>212</b>

Table one highlights the number of responses to the questionnaire, the number of participants excluded on the basis of the geographical and age selection criteria and the

final sample size used for the analysis. A total of 14 participants did not list a town of residence on their questionnaire but were recruited in London and Oldham so were kept in the sample. There were 18 surveys on which participants did not give their age, but ticked the box to confirm that they were over 16. These were included in the analysis. Table two indicates the number of participants in the final sample by geographical location.

**Table 2 – Survey sample by geographical location**

Location	Number of participants
Oldham	127
London	79
Recruited in London or Oldham with a paper questionnaire, but no location listed	14
<b>Total sample</b>	<b>212</b>

**Table 3 – Survey sample by questionnaire format**

Format	Number of participants
Hard copy (paper)	164
Online	48
<b>Total sample</b>	<b>212</b>

I invited participants to self define their ethnicity, which was intended as a way of collaboratively producing the categories for the research, although this yielded inconsistent data, in which participants would sometimes write their nationality rather than their ethnicity. Participants were given category boxes for sexuality but also some defined outside of this. A detailed breakdown of participants by ethnicity and sexuality can be found in Appendices B and C.

Social classifications of any kind can be difficult to define and measure. Class has historically proven particularly complex, facing issues such as the changing position of

women in society and huge changes in employment over the last few decades (Abbott and Wallace, 1990; Rose and Pevalin, 2003). Researchers have often used indicators such as employment, educational qualifications and household income to categorise participants by social class (Rose and Pevalin, 2003). However, people's lives rarely fit into neat definitions, both in terms of changing life circumstances and their perception of their own class. Indeed, as I argued in chapter two, classificatory systems can be understood as a form of regulation through which particular bodies become 'knowable' and 'measurable' (Skeggs, 2004a; Waldby, 2007).

In attempting to make sense of the complexity of the operation of social class, social theorists have developed concepts such as social capital (Bourdieu and Wacquant, 1992, p.119) and value (Skeggs, 2004a). Such theorists conceptualise class as produced through continual material and symbolic struggle (Skeggs, 2004a). I included questions about income, occupation and educational qualifications on the questionnaires. However, after speaking with participants about their class identifications and family backgrounds in interviews it did not feel particularly helpful for the analysis to designate survey participants to a class based *purely* on the measures of occupation, income and education, particularly as I was not attempting to conduct statistical analysis. Therefore, in making sense of participants' class positioning I have drawn on discussions with them about their parents' occupations, their home life growing up, their class trajectories and current employment, in addition to drawing on broader sociological understandings of the social construction of class distinctions through questions of cultural capital and taste (Bourdieu, 1984; 1986). I have built in particular on Skeggs' (2004a) and Tyler's (2011) work that has explored how social class is made and remade through cultural representations, in which particular kinds of selves are attributed value while others are positioned as 'object'. As outlined in chapters two and three, this thesis takes a discursive approach to the

construction of identity, and as such is concerned with how particular systems of knowledge and representation reproduce, resist or rework social and historical relationships of power and inequality (Skeggs, 2004a). For example, in chapter eight I examine how class and gender are discursively constructed in an episode of *the Jeremy Kyle Show*, in participants' own representations of the guests on the show and how they position themselves in relation to the show's discourses of class and gender.

Whether in interactions with gatekeepers at universities, at sexual health clinics or when approaching participants to complete a questionnaire, distributing surveys required interrupting people's lives. Rebekah Wilson has explored her experiences of quantitative street survey work using Goffman's dramaturgical model (Wilson, 2010). She used his concept of social interaction as theatrical performance to examine her own performances and the roles that she played in the snapshots of everyday life that she caught during her research. Wilson examined the anxieties around the performance of her carefully crafted survey in the 'real world' as participants complained loudly about the questions or the inconvenience of the labour involved in filling it out. It is a strange moment when your work reaches the outside world and has to compete with waiting rooms, the buzzing of cafés or workplaces. For example, I heard participants tutting that the questionnaire was 'like a job application' or asking each other what questions meant, illustrating the effort I was asking research participants to make for nothing tangible in return.

This research is conducted in a cultural context in which the subject of sexuality is often considered to reside in the private sphere, but paradoxically at a time in which, as Plummer (2003) puts it, the stories of sex are everywhere. Plummer analyses the role that researchers play in 'coaxing' these stories from participants. I was particularly mindful of

this at one university site where I had a bowl of sweets to 'tempt' participants over to my stall to fill in a questionnaire. It turned out that participants were far more tempted by my poster reading 'volunteers wanted' and the potential for improved employability they thought that offered. This highlighted a number of issues in relation to the social and historical context of the research. The current recession in the UK has meant that increasing numbers of young people face unemployment. Indeed, students graduating from university now face pressure not only in terms of finding work but also from rising tuition fee debt and the threat of cuts to social housing and other welfare benefits. In the context of the neoliberal workplace, skills acquisition through voluntary work forms part of a discourse of self-development, in which unemployment is framed as an issue of personal responsibility, rather than an issue related to labour markets and economic policy (Skeggs, 2004b, p.78). Voluntary work has additionally become positioned in UK policy discourse as an alternative to public sector employment, in which services are contracted out to the voluntary sector. This example of neoliberal governmentality placed the discourses of intimate governance I found in my data in a wider ideological context.

The recruitment of research participants not only involves the researcher, but often involves performances from others – gatekeepers such as College administration staff, managers in workplaces and editors in newspapers. Participants also involved themselves in the recruitment process, shouting across busy hallways, persuading friends to take part. One such intervention was literally a stage performance, in which a drag queen in a pub performed filling in her questionnaire on stage and worked as a co-persuader, encouraging others to take a questionnaire from me and tell me their stories. Goffman's exploration of performances is not limited to those that take place on stage, but rather concerns the everyday roles available to those who speak, those who are spoken to and those who are bystanders in public spaces (1990). Such encounters, which might otherwise be seen as



outside the data of the research, present an opportunity to explore the discursive field of sexuality at particular moments. They give insight into what is considered the 'common sense' of condoms at a given moment, but also the common sense of sexuality and gender and the shifting nature of power in the research process. The language that people use, the positions they adopt, what is considered to be the 'natural' understanding of particular statements that need no further clarification, give insight into the construction of condoms and condom negotiation, and the ways that the performance and policing of identities relate to these constructions.

### ***More than ticking boxes: collecting survey data***

Because of the varied ways that questionnaires were distributed, they were filled out in very different contexts – from participants filling them in online, where I am not present and cannot be sure whether they were filled in alone or with others, to participants filling them in by hand, sometimes alone, sometimes in spaces where many other people were filling in questionnaires, sometimes sitting together with friends, and those who preferred me to read the questions to them and asked me to fill them in myself. As such, the data from the questionnaires cannot be understood as 'standardised', although all participants filled in the same questionnaire. I have kept extensive field notes about the different ways that participants engaged with being asked to fill in a questionnaire, and how we interacted with each other during this process, including the embodied experience of approaching strangers to talk about condoms and the ways that humour was often mobilised by both me and potential participants as a way to navigate the unusual situation of a stranger addressing such intimate questions in what are considered to be public spaces. In terms of my own performance as 'researcher' or research student, I found that I had more success at persuading people to take part when I introduced the questionnaires as 'part of a degree in

psychology', wore an ID badge around my neck and carried a clipboard as a marker of my authentic, official and scientific status.

The field notes from this process began the analysis for this thesis. The distribution of questionnaires and the discussions around them enabled me to observe some of the ways that condoms and sexual knowledge are constructed. This data fed into my analysis that condoms were often presented by potential participants as an object that belongs, or is relevant to particular social groups such as adolescents or those not in long-term relationships. Potential participants often used comments about their identity or current situation as self-evident reasons for why they would not have anything to say about sex or condoms. For example, participants from their 20s upwards often used their age as a reason why the research 'wouldn't apply to them' – either as condom users, or those who would seek information about sex. When I explained that I was finding out where people get their information about sex I was sometimes met with confused looks; a group of women in their 30s commented 'we don't need to look for information about sex at our age, we know it all'. Participants would scrawl across the questions about their current sources of information 'don't need to look'.

As discussed in chapter six, much of the existing health research on condom use focuses on 'risk populations' in need of health behaviour intervention. Such research, and the policies and health interventions around it, make up part of the discursive formation of 'sexuality' in general, and 'sexual health' in particular. In some of these constructions adolescent sexuality almost becomes synonymous with a preventative model of 'sexual health', in which teenage sexuality is only intelligible in the context of analyses of STIs, HIV and unintended pregnancy (Vitellone, 2008, pp.20–23). The focus of my research, on condoms, and with an upper age limit, could be seen as playing a part in the discursive construction

of sexuality as related to health behaviours, and the area of sexual knowledge as relating to particular age categories.

Much of the literature on young people and sexuality reports anxiety about the age at which young people should know about things like condoms. The figure of the 'innocent child' is often mobilised in public debates about the sexualisation of culture or comprehensive sex education (Attwood et al., 2011). I had outlined in my ethical protocol that I would not be approaching young people under 16 to fill in questionnaires, and was required by the Open University HPMEC to give reassurance that I would take all steps possible to prevent anyone under 16 from filling in the online questionnaire, relating to questions of legal consent for young people under the age of 16. In response to an advertisement I submitted to a local paper, the advertising office requested that I change the wording, stating 'we are a bit unsure of the wording as this is a family newspaper and wish for the word condom to only appear once if you could please have a rejig the wording a bit then send it to us we will price that up for you.' On the telephone they asked me to replace the phrase 'sex in the media' with 'sexual health in the media'. I reflected in my field notes that it was interesting that the word 'condom' created such concern and seemed to be presented as a threat to families and something that young people shouldn't see. This highlights that the operation of power in the research process incorporates additional relationships to those between the researcher and participant. Gatekeepers and the norms within which they operate affect the parameters within which research can be conducted.

I reflected on the operation of power in the research process throughout the collection of the data. My position as a white woman with a southern English accent was part of the context in which access to recruitment sites were negotiated, and interactions with participants occurred. In particular the topic of the research seemed to foreground gender

as an organising category in encounters with participants. Michael Schwalbe and Michelle Wolkomir (2001) have explored the ways that some of their heterosexually identified male participants worked to assert control in an interview situation with female researchers, using flirting, sexual innuendo and so on. They argue that this can be a way to attempt to regain power in a situation that can feel threatening, in which a woman is setting the agenda and requesting personal disclosures. Similarly, Sabine Grenz (2010) has explored the differences in her interviews with heterosexual male clients of female sex workers in Germany, compared to a similar study conducted in Germany by male researcher Gerheim. Research concerning sex could be seen as an already sexualised encounter – Grenz considered that she was positioned as sexualised in the context of her heterosexual male participants (2010). I reflexively analysed the way that some research sites were sexualised in different ways: some through humour, and some more aggressively so. Conversely some of the sites felt surprisingly non-sexual, despite the fact that sex was being discussed.

Similarly with Grenz's experience of researching sex, some male heterosexually identified participants asked if the interviews would involve sex, if they could demonstrate putting a condom on for me, if I would go out with them or introduce them to other women.

Rebekah Wilson (2010) noted in her analysis of survey work about name-changing in marriage that she employed what Goffman calls 'mystification', hiding certain details of her identity as a way to ensure a particular performance, removing her wedding ring so that she would not have to engage in conversations about the fact that she had not changed her name herself. Such mystification is complex, as some markers of identity (such as 'race' or gender) are not so easy to hide, or decisions to reveal information can change depending on particular contexts. For example, while I was completing a questionnaire with a male heterosexual participant in a gay-friendly pub, he asked me about my sexual identification. Reading the pub and its rainbow flags as a 'safe space', the participant as 'gay friendly'

(both in terms of the location and some comments he had made in conversation) and mindful of the power Foucault (1981) has identified in the one-way disclosures of the confessional, I told the participant that I identified as bisexual. About a month later, the same participant had recruited a further participant for the survey, following my snowballing method. This participant-led recruitment had included 'outing' me, which led to an uncomfortable experience in which the completion of the survey was peppered with innuendo and comments about pornography that I think would have been differently framed if the disclosure had not happened in the way that it did. This participant was in earshot of people that he knew as we filled out the questionnaire, and performed an aggressive heterosexual masculinity for the 'bystanders', as Goffman (1990) would put it. It is interesting to note that while the power dynamics of the confessional can be seen to privilege the 'coaxer', disclosures that are made during surveys and interviews with researchers are regulated with a strict ethics of confidentiality, while disclosures made by researchers might not be seen in the same light, illustrating the complicated nature of power in the research encounter.

Many qualitative researchers have explored the tensions in the research process when they hear oppressive language about 'race', gender, sexuality and disability (see for example Braun, 2000; Flood, 2008; Lewis, 2010; Scharff, 2010). Researchers grapple with moments of potential collusion while being mindful of the impact any interventions might have on the research process, including the data collected. I was asked to explain to participants why I had listed 'female, male, other' and the meaning of different words describing sexuality identifications, often responding to questions such as 'which one means normal?'. This highlighted the challenge inherent in designing survey instruments that attend to questions of oppression, such as transphobia and heteronormativity, but are also accessible to participants. I found myself uncomfortably silent during conversations between

participants as they completed their questionnaires when there were racist, homophobic and sexist comments being made. Some of these conversations were moments in which participants in the conversation had their identities policed through jokes and teasing about sexuality, in which ticking the 'bisexual' or 'lesbian' or 'gay' box could have been problematic. I questioned myself during these encounters – was I colluding with these instances of oppression by not responding? (Wilson, 2010). Reflecting on the distribution of surveys was productive in the analysis of the discursive construction of sex and condoms at the particular moment of this research project, in the specific contexts of the recruitment sites. My field notes were used in the development of my interview approach and schedules and grounded my data analysis in the context of the situated production of knowledge through empirical research.

One of the limitations of the survey was the section on participants' use of media (see Appendix G). A number of participants found the format confusing or ignored this section of the questionnaire. This could have been a result of the layout of the response grid, which made the questionnaire seem quite long. In contrast, the open-ended questions on condom use generated rich data from a large number of participants, which has been central to the development of my analysis. While open-ended questions can be off-putting for participants as they can take longer to fill in, two open questions on media use might have proved more productive for the analysis and resulted in a higher number of completed questionnaires.

The open-ended questions were approached quite differently by participants completing the questionnaire online compared to the paper format. The online questionnaires were hosted on a blog I created for the research project. Participants came to the online questionnaires from a variety of online publicity, snowballing and from following up

posters and the advert about the project. The open-ended questions on the online questionnaire used text boxes which expanded to fit the text of the participant, while participants using the paper questionnaire were limited to the small box printed on the page. Consequently, participants' responses to questions online tended to be longer and in a more conversational register. Participants completing the paper questionnaire were also usually in public spaces or at work, so they were likely to spend less time filling it out than someone sitting on a computer at home. Survey participants were all given information sheets explaining both the questionnaire and diary-interview aspects of the research (see Appendix F).

## ***Interviews***

As I noted in chapter three, feminist research has worked to develop methods that foreground participants' voices. Feminists have long turned to interviews as a useful method to challenge the hierarchies in the research process and provide space for participants to narrate their experiences in their own words (Oakley, 1981; DeVault & Gross, 2006). I recruited participants for the interview and diary stage of the research via a box at the end of the questionnaire in which participants could enter their contact details if they were interested in taking part. This section, which contained some personal details, was detached and stored separately from the questionnaires. I conducted a short screening of participants by telephone to ensure that they were eligible to take part in the project. Through this recruitment process, 60 participants gave their details for more information, 10 of whom were not eligible to take part because of their location. Of the remaining participants, 27 agreed to take part in the first round of interviews, and 20 of these took part in the second round, six months later. One participant was recruited and did not turn up for their interview. A list of all 26 interview participant pseudonyms and demographic

information is available in Appendix D. Throughout the thesis, participants' accounts are followed by abbreviated demographic details, for example a 36 year old white British heterosexual woman from Oldham would be listed as (O, f, mid 30s, het, WB). Interview participants will be described in the text in the first instance that they appear in the thesis, and subsequent extracts are followed by the abbreviations above to avoid repetition.

**Table 4 - Interview participants**

Location	Number of participants
London	15
Oldham	11
Sex	
Female	17
Male	9
Ethnic background	
White British	12
White	8
Indian	2
White European	1
Pakistani	1
Black British	1
Middle Eastern	1
Sexuality	
Heterosexual	16
Bisexual	9
Gay	1
<b>Total interview participants</b>	<b>26</b>

As can be seen from table 4 above and Appendices C and D, the sample included a higher percentage of female than male participants. This had an impact on the data available for analysis. While the analysis and discussion in this thesis draws on data from surveys and interviews with participants of different genders (including those who did not state a



gender), the higher proportion of female participants does mean that there is more data presented in relation to female participants. There is consequently a potential risk of reproducing the representation of condom use and sexual health as a 'women's' issue. I have endeavoured throughout the analysis to interrogate this assumption and include the experiences of male participants.

The first round of interviews took place between March – November 2010 and the second between November 2010 – August 2011. I recorded and transcribed the interviews verbatim, though the recording was unusable for two interviews which meant I was unable to transcribe them. One of these participants I interviewed a second time, so was able to ask some of the same questions again, while the second participant was unavailable for a second interview so I relied on my notes for the analysis. The first interviews were shorter and intended as an introduction to the project and for us to get to know each other. These were semi-structured and lasted between 20 minutes to one hour. An interview schedule was designed using current literature on condoms, observations from my pilot study and my field notes from survey work. The schedule was used to allow for a conversational style. This meant that the same topic areas were covered in the first set of interviews, though not necessarily in the same order as conversation sometimes led us to topics elsewhere in the schedule or topics not included in the schedule at all. The second interviews were based around insights from the first set of interviews and the diary. These interviews were much more open, beginning with conversational questions such as 'so how have things been over the last (six) months?' or 'how have you found keeping the diary?' in relation to the conversation that had already begun when I greeted them and set up the audio recorder. Depending on how much participants had engaged with keeping a diary (see below), we would use the entries in the diary as a prompt for an open conversation. The second round of interviews lasted longer, at around an hour, with the shortest lasting

25 minutes to the longest at 90 minutes.

Interviews were generally carried out in booked room space at the Open University in London and at the Link Centre, a voluntary sector space in Oldham. However, I was aware of the commitment participants were making to take part so arranged interviews at alternative venues at their convenience. Four interviews took place in participants' workplace, I interviewed two participants at their homes and two participants who were known to me were interviewed at my home. One participant was only able to meet during her short break at work in a café, which meant the interview was much shorter. This had an impact on the data as the space was not as private as behind the closed door of a meeting room or house.

Four of the participants were known to me. I thought very hard about interviewing people that I knew. I have volunteered for many years at an emotional support helpline, and felt that the high wall of confidentiality that I was required to maintain for that (for example not talking about the content of any calls outside the organisation) helped me to ensure that I drew a line around what was said in the interview. There are benefits and drawbacks of interviewing people in your own network. In some interviews, there could have been a perceived shared understanding of particular situations, which might have meant that participants did not explain in as much detail as they might have done with a stranger. Interviewing known participants also presented challenges in terms of the kinds of close analysis required of data, particularly the 'critical' aspect of 'critical respect' (Gill, 2007a). I reflected in my field notes about this challenge, thinking through my commitment to approach all data with the same critically respectful eye.

Research on sexuality requires asking questions about very personal matters that are not

always discussed with others. I took a conversational approach that probed issues with participants but maintained an awareness of the difficult topics under discussion. At the beginning of each interview, I discussed with participants not answering questions if they did not want to and explained that the interviews would be recorded and they could ask me to stop recording at any time. During the interview if I felt participants might be uncomfortable with a question I would reiterate that they did not need to respond if they preferred not to. Using a semi-structured interview format meant that we could engage in conversation, the participant could lead the conversation in a different direction if they wanted to (and often did) but that during the course of the interview the key topic areas were covered. This conversational style also enabled me to check with participants that I had understood their meaning and give them an opportunity to clarify or explain things further.

As discussed in chapter three, I was interested in exploring both the content and in some cases the more micro detail of the interview data. Transcription is not just the process of putting words from a tape onto paper. Behind what would seem a transparent task lies a bodily process, grounded in time and location. The recordings were slippery, seeming to shift day to day, sometimes feeling very different to the interview I had remembered. I struggled with how to capture the meaning from the participant on the page. I did not want the level of detail many conversation analysts work with, but felt that some of the detail was helpful in exploring the interactions in the interview – the interruptions, the emphasis, the points where participants' voices were lowered. These all seemed important to include. I adapted the transcription symbols developed by Gail Jefferson (Speer, 2005, p.199; Edwards, 2006) to capture something of the feel of the data (see Appendix K).

A useful example of how this detail fed into the analysis of the data was the question of

transcribing laughter. In a discussion with a colleague we agreed that interviews about sex seemed unusually brimming with laughter. I began by transcribing it as ((laugh)) but it seemed insufficient. At times there were short, nervous laughs at the end of stories told by participants. I wondered in my field notes whether they were signalling to me, as a perceived 'judge' of their behaviour, that they thought their story was not what I wanted to hear. I noticed as I analysed the data that such laughs were sometimes followed by apologies, justifications. At other times our laughter joined together, co-constructing what we meant in that moment of recognition, or perceived recognition of a situation. Still other laughs were less easy to untangle, they burst in, unexpected. When it was my laughter, I was embarrassed when I heard it on the recording. Laughter can open up space for discussion, putting participants at ease, but in that same moment can create a feeling of vulnerability as a researcher. It is an act of human connection. But such displays of intimate recognition position the researcher as immediately subjective: responding, producing meaning, not simply observing.

As I heard this laughter played back to me I reflected that perhaps how *funny* sex can be is sometimes lost in the rush to catalogue STIs and unintended pregnancies. I wondered in my notes whether there is room for laughter in sex research, as we explore the mundane alongside the extreme in participants' experiences. However, sex is a serious business, with the persistent violence of sexual coercion, homophobia, sexism, racism, ableism and classism. I came across all these messy entanglements of power in my recordings. Laughter, in this sense, was not always a pleasurable experience. It is possible that there were places in the interviews where laughter shut down conversation. For example, if I laugh knowingly, what need is there for the participant to explain further how they see the world? Does this laughter allow me as the researcher to abdicate my responsibility to take a respectfully critical eye, and retreat into a more comfortable place of perceived

agreement? While laughter can make the space available to talk about things participants say they never talk with their partners about, it can co-construct norms, like where it's appropriate to have sex, what counts as an 'embarrassing' situation, what deserves exclamation, surprise, pleasure or sympathy. It can create a semblance of similarity, or highlight differences between us if I fail to get the joke. I decided to include more detail in my transcription, attempting to describe the laughter in double brackets. As I came to the analysis I found that these in-transcript notes were invaluable in thinking through the construction of sex and condom use in the interview, what were presented as shared understandings and the structure of participants' accounts of their experiences in interaction with me.

I was mindful of the power involved in the collection of data and the responsibility to be accountable to participants who had given their time and often discussed very sensitive issues with me. I asked participants if they wanted to read copies of the transcripts from their interviews. Six participants requested to read their transcripts, none required any data to be removed. The question of whether to offer transcripts to participants is complex. This process could be seen as 'giving something back' to participants who have given their time for free: for example one participant said that they thought they might gain some insight about their life from it. However it is also important to note that interviews happen as a snapshot in time, and reading back over difficult or different times might cause distress or embarrassment about how much the participant had shared, or bring back difficult memories. I explained to participants that while I used the whole transcripts for data analysis, no-one else saw complete transcripts except me (and them if they chose to) and that only small sections of anonymised data would end up in the final thesis. These questions of confidentiality are central to any research with people, and also framed my approach to the use of diaries in the research.

## ***Diaries***

As discussed in chapter three, researching participants' sex-lives presents ethical problems for observational approaches to interaction (Coxon, 1996). One method that sex researchers have found useful in the analysis of sex is the diary. Researchers from across disciplines, theoretical backgrounds and epistemological frameworks have used diaries as a flexible tool in collecting data about the everyday operation of social life. As a method that can collect both quantitative and qualitative data, diaries have proved useful for researchers keen to understand the patterns of everyday social life (Bolger et al., 2003). For researchers interested in longitudinal data, diaries lend themselves to analysis of changes over time (Bolger et al., 2003; Bell, 1998), or research focussing on a particular period in a participant's life. The use of diaries is not a new method in the analysis of sexual behaviour. Coxon et al. (1996) developed the use of quantitative diaries to record the specifics of participants' sexual behaviour, collecting data on sexual acts, and use of drugs, condoms and lubricant. Similarly, Hatherall et al. (2005) collected quantitative data on the details of participants' condom use – seeking to move beyond the question of *whether* participants used condoms to explore *how* they were used in each instance. Both Hatherall et al (2005) and Coxon et al. (1996) combined quantitative diaries with qualitative data collected in interviews, focus groups and surveys to provide an in-depth picture of their participants' sexual behaviour. The discussion that follows will focus on the reasons for using private diaries in researching the negotiation and representation of condom use. I have explored the range of different approaches to diary research in more detail elsewhere (Harvey, 2011).

As discussed above, I was interested in the way that participants constructed their

experiences of condom use, and how this related to media representations of sex and condoms. I approached the use of diaries as a tool that could be used in a second interview to explore participants' experiences. The 'diary-interview' method (Zimmerman and Wieder, 1977) involves the use of a solicited diary as a discussion prompt in interviews. Usually the diary itself forms part of the data collected, and the researcher and participant discuss the contents of a diary, memory book or scrapbook (see Buckingham and Bragg, 2004; Thomson and Holland, 2005 for good examples of the use of memory books and scrapbooks in qualitative interviews).

While researchers can use more directive research design with diaries, such as specifying the content or form that participants are asked to record, diaries can be used as a way to enable participants a certain level of control over their self-representation. While this is arguably the case in interviews (as participants can present themselves in particular ways or choose not to respond to particular questions) there is something about the craft of creating a diary that offers a different form of self-representation. Bowes-Catton and colleagues (2011) have explored the ways that visual methods can be useful in exploring issues that are difficult to put into words. While ultimately this research project *was* about the words participants used (or did not use) about sex and condoms, the diaries were intended as a way for participants to reflect on the subject before the interview. Thomson and Holland argue that their use of memory books in exploring young people's transitions to adulthood enabled:

an approach that was less driven by our research agenda and more by the young person. In this way we hoped that the memory books would serve to de-centre the interview process, bringing aspects of the young person's experience outside the room into the research encounter. (Thomson and Holland, 2005).

Following Thomson and Holland, I used diaries in the second interview as a 'prop' for the participants to use. I introduced the diary at the end of the first interview, giving the participant a spiral notebook to take home. I explained to them that I wanted them to write about their experiences and memories of sex over the next six months, and write their opinions on any sex (and particularly anything about condoms) that they saw in media such as television, film, magazines and gave them an opportunity to ask questions. I had decided to introduce the method in conversation rather than with a list of instructions, or 'tips' as I had in pilot work, as I had felt that this had been overly directive and had had an impact on the way that participants described their sexual experiences (see Harvey, 2011). I contacted participants after four months to find out how the diary-keeping was going and to arrange a second interview. In some cases it took much longer to arrange the second interview with participants. The longest period between interviews was 17 months with the second interview rearranged many times. I asked participants to bring their diary to the second interview. A number of participants had lost their diary, found it difficult to write or forgot to bring it – our interactions in the interview in these moments highlighted the commitment I was asking of participants as I felt positioned like a teacher asking for homework from students. Only six participants out of the 20 who attended a second interview brought a diary along with them. Three participants said they hadn't keep the diary at all, the remaining participants said they had kept a diary in various forms, including scraps of notes, but had not brought these with them to the interview.

I began the interviews with an open question such as 'how did you find keeping a diary' and 'how have you been over the last X months' and depending on the preference of the participant, asked them to talk me through the time they had been keeping (or not keeping) the diary for. Those who had kept a diary in some form varied widely in how they had



approached the method. One participant had filled up the entire notebook and started on another, other participants had written a few entries and then forgotten until I got in contact, one had divided the diary into 'theme' sections and another had used it as a tool with her partner to communicate about their sexual desires, dislikes and fantasies. With this participant, the diary took on multiple meanings – it was both a research method and a communication tool as they used the back page to list which sexual activities they had tried, which they wanted to try:

**Extract 4.2**

Julie: um (.) we've got a to-do list at the back ((both laugh)) getting through ticking ticking	1
quite a few things off ((both laugh))	2
LH: is it a to-do list like a sex to-do list	3
Julie: yeah [(.) yeah	4
LH: [excellent	5
Julie: like I say the diary's been good and it's been a good communicator as well (.) [cause I	6
put in	7
LH: [yeah	8
yeah	9
Julie: at one point I put in that he's not doing (.) um (.) he's not giving me oral sex enough	10
and I've no problem saying it to him but I wrote it in the diary and he would look and think	11
oh right ok [LH: m] so you know (.) um	12

(Interview, O, f, late 30s, bisexual, WB)

My own response to participants' accounts of keeping the diary structured its position in the research in a particular way. For example, in the extract above I express pleasure in

Julie's use of the diary method, my praise ('excellent', line 5) positioning Julie as a 'good participant'. Participants who had not kept the diary were conversely apologetic.

Not all participants presented the diary's intervention in their lives as positive. Keeping a diary had been difficult for some:

**Extract 4.3**

LH: so (.) ah (.) so the diary as a method [m] was quite difficult to keep up with or 1  
whatever (.) yeah so you started to keep it initially 2  
Elizabeth: I started to keep it initially and then (.) this is really bad I was trying to look this 3  
morning I'd forgotten (.) I know it's about (.) condoms (.) and I know it's about media and 4  
sex and just generally? [LH: yeah] that kind of thing and I swear I started writing the diary 5  
(.) and it was a time when I was (.) um (.) changing contraception so my boyfriend and I 6  
had only been together for about a month and not using condoms (.) and I hadn't told him? 7  
And my diary got really really personal and I didn't feel comfortable writing about our 8  
relationship and not telling him about it? [LH: mm] so I sort of started hiding the diary and 9  
that felt a bit weird and I think eventually I just stopped writing because I'd rather not (.) 10  
write stuff down [LH: m] and not tell him about it but it wasn't necessarily that I wanted to 11  
(.) tell him everything I was writing down? [LH: mm] if that makes sense 12  
(Interview, L, f, early 30s, het, WB)

Unlike the conversation with Julie, above, the exchange in this extract with Elizabeth illustrates the 'responsibility' that participants were faced with in being asked to keep a diary. Elizabeth is apologetic for not having kept up the diary. This extract also indicates that questions of confidentiality in diary research include the other people in participants' lives.

In the context of the increasing cultural availability of sexual stories, keeping a research diary is part of the discursive construction of sex as something which people *should* be able to talk about (Plummer, 2003; Harvey, 2011). In the extract below, Sonia describes finding it more difficult than expected to write and talk about sex, positioning herself as a 'prude'. A number of participants positioned 'prudishness' in opposition to 'openness'. I would argue that the diary can be understood to have played a role in this construction:

**Extract 4.4**

LH: and did you write stuff down? [(**)	1
Sonia: [I did um (.) for a while I kept some brief notes of	2
things when sort of things came up on the TV and a few (.) um (.) sexual memories um (.)	3
yeah (.) made a few notes just (**) ah (.) I think for me I've ((slightly laughing)) realised	4
from this (.) talking about talking about sex I'm not really that (.) comfortable with it [LH:	5
mm] which I didn't know (.) I thought I was a bit more you know sort of open um (.) and	6
modern ((both laugh)) actually I think I'm a real prude ((laughing)) I find it like really	7
difficult	8

(Interview, O, f, early 40s, het, WB)

As I have discussed elsewhere (Harvey, 2011), a private diary can offer an opportunity for participants to reflect on their experiences over a specified period of time. This enables a different kind of data in the interview. This was particularly interesting for exploring participants' ambivalence about their sexual experiences or behaviour, such as inconsistent condom use. While participants who had not brought a diary with them to the second interview had still reflected on their experiences between our two meetings, the structure of interviews with participants with the 'prop' of a diary was qualitatively different.

Participants talked me through different experiences, often taking charge of the structure of the conversation, such as discussing their entries in chronological or thematic order.

Participants who had kept diaries also had more specific comments about media that they had engaged with since our first interview, with some bringing cutouts from magazines, titles of programmes and so on. However, most participants (regardless of the diary) talked about having thought about media representations of sex around them between our interviews.

### ***Media analysis***

I explored how participants made sense of media representations of sex and condoms in two different ways. Firstly, I collected and analysed survey data relating to where participants first found information about sex and where they find information about sex now. Then I asked participants to include reflections in their diaries about media representations they saw of sex and condoms, and discussed this with them during our second interview. In the first round of interviews I also asked participants to reflect on their use of media for finding out information about sex when they were younger and now. After I completed the interviews, I selected a case study for discursive analysis based on conversations with participants in their second interview. The selection criteria for the case study are outlined below. In exploring the representation of condom use in media, I wanted to start from the perspective of the participants in the study, and the meanings *they* gave to media representations. I had expected participants to list particular sex scenes, in which I had planned to analyse the representations of condom use. However, participants overwhelmingly talked about the *lack* of representations of condoms in the mainstream media.

Analysing participants' accounts of media raised methodological challenges; participants engaged with a multiplicity of different forms of media and particular named media texts. The multimodal nature of mediated sexuality became clear as I mapped out all of the media that were mentioned in participants' accounts, including those in the survey data. In order to make more sense of this, I looked for patterns and categorised the data into seven broad genres: film, television, magazines, books, health promotion, advertising, online and pornography. In addition to variety between genres, these broad categories contained a great deal of variety within them, and in some cases overlapped, for example pornography was mentioned by participants in relation to film, online and magazine media. Many of the references to media texts were quite general, or included a number of titles. For example, teenage magazines were talked about a great deal, with *Just Seventeen* and *More* receiving the most number of references by participants across the survey and interview data.

As many of the discussions of media representations tended to fall into broader categories, rather than discussions of specific media texts, I decided to divide my analysis into an examination of participants' accounts of three types of media which had been referred to by participants in relation to their own sexual experiences; magazines, online communities and blogs, and pornography. I then selected a further media case study for discursive analysis based on the following related criteria:

- More than one participant referred to the media text
- The text was drawn on in a discussion about the participants' own experiences (rather than just listed or mentioned in passing)
- Condoms were represented either through talk or visual representation in the text

These selection criteria were designed to enable a discursive media analysis that could be

combined with an analysis of the participants' own talk about the media and their own sexual experiences, addressing the research questions outlined at the start of chapter one.

As such, the analysis in chapter eight begins by exploring participants' accounts of the three broad media categories outlined above, then focuses the argument on a detailed discourse analysis of an episode of *The Jeremy Kyle Show*, which was referred to by two interview participants, as I discuss below. In addition to this media-focused chapter, I have analysed participants' accounts of media representations of sex and condoms in other chapters in the thesis, for example in exploring dominant narratives of 'the moment' in chapter seven. I chose to analyse *The Jeremy Kyle Show* as it met the criteria above, and had adopted quite a prominent position in two participant interviews in relation to their sense-making about condom use. In addition, a further interview participant referred to another talk show that she had used as a tool in conversation with her daughters about sexual risk taking. As I outline in chapter eight, both participants referred to a common catchphrase of the show, 'put something on the end of it'. This catchphrase refers to condom use, and is often aimed at guests on the show who have unplanned pregnancies. I selected one episode of *The Jeremy Kyle Show* purposively based on its specific focus on the question of 'sexual health'. The show was aired on 22<sup>nd</sup> November 2010, during the period in which participants were keeping diaries, and was publicised in *The Sun* newspaper as a form of education about STI prevention (Buckner, 2010). The specific representation of the episode as educational in a widely-read daily newspaper marked it out as a useful case study of the wider pedagogical narratives of talk shows that the participants had made reference to. In addition, the focus of the show on sexual health enabled a detailed analysis of the positioning of condom use in relation to this issue. At the time of writing, the episode has been aired a further seven times since its initial transmission on ITV1 and ITV2. I transcribed the episode verbatim, and used the rhetorical

analytical tools I had employed with the interview and survey data.

It is important to note of course that one episode of *The Jeremy Kyle Show* cannot stand in for the whole series. Indeed, the show was part of a health special, which had a markedly different tone to the usual confrontations between guests of the daily programme. In order to contextualise the data collected from the show, I watched one week of *Jeremy Kyle* shows on weekdays from 24<sup>th</sup> February – 1<sup>st</sup> March, explored the representation of the show online, both on the official *Jeremy Kyle Show* website and through searching for references to *The Jeremy Kyle Show*, and read Jeremy Kyle's autobiography 'I'm only being honest' (2009). In addition to highlighting the limits of an analysis of one episode, I want to stress that I am not assuming a singular possible reading of the text. My reading is, of course, an interpretation using the feminist rhetorical tools I outlined in chapter two, and is situated in relation to my own experiences and social position (Ashcraft, 2003). Indeed, any media text is open to multiple possible readings by participants. For example, in one of the few cases in which participants referred to the same media text, two participants expressed quite different interpretations of a late night television show, *Sexetara*, which includes quite explicit representations of sex, often incorporating features broadcast from pornography film sets:

**Extract 4.5**

Natalie: 'it is quite educational [LH: m] and I was like (.) it's more for adults that though 1  
but they should do something like that a little bit milder for children' 2  
(Interview, O, f. mid 20s, bi, WB)

**Extract 4.6**

Sonia: 'it's like things like that really shock me that they're actually on (.) normal telly [LH: 1  
m] cause like when I was a kid you'd never see anything like that and like you think (.) 2

your kids sort of aged 14 15 could potentially sit and watch stuff like that and not really 3  
 have any of a (.) concept around it' 4  
 (Interview, O, f, early 40s, het, WE)

While both participants seem to agree that the show is not aimed at (or possibly appropriate for) a young audience, Natalie positions the graphic descriptions and representations of sex that feature on the show as a potential blueprint for a 'milder' version that could be aimed at children, while Sonia reflects a narrative of protection that is familiar in the recent debates about 'sexualisation of children' (Buckingham et al., 2010; Attwood et al., 2011; Gill, 2012).

Developing the argument made about ideology in the previous chapter, my media analysis was situated in a theoretical framework that stresses the *multiplicity* of representations, but also takes into account the constraints within which individuals make sense of both talk and visual representations (Hall, 2002). In this sense, I am not arguing for a form of relativism that suggests that *all* readings of media texts are equally possible. Rather, as I argued in chapter three, I approach media from the perspective that such readings are negotiated in the context of the cultural, material and discursive resources available to participants, and that my own analysis is undertaken in a similar 'net of constraints' (Hall, 1986, pp.41–2).

### ***Researcher diary***

Drawing on Hollway's (1989) analysis of the reflexive potential of exploring personal experience alongside data collection, I kept a research diary in which I reflected on both the research process and followed the instructions I had given participants myself, by



recording sexual experiences and media representations I saw about sex. I had found keeping a combined diary like this extremely productive in my pilot work (Harvey, 2011). The researcher diary functioned in a similar way to a field notes journal, which is a common feature in much qualitative research. As with the pilot study, I found that reflecting on my own experiences alongside my research design, implementation and analysis was a productive way to examine my own position in the process and take this into account during my analysis and writing. For example, the discussion about survey analysis above built on the diary entries I made while distributing questionnaires. I reflect in chapter eight about my reactions to a female participant talking about having painful sex, wanting to give her information, and what this meant for how I was positioning 'pleasure' in my analysis (McGeeney, 2011).

Writing a diary of my own experiences arguably brought an additional strand to this reflexivity, as I grappled with theory, data and transcription alongside my own sexual negotiations of condom use and the issues of female sexual subjectivity explored throughout this thesis. I think that both the practice of keeping a diary, and the reflections made within it which I have used in my analysis, helped me to remember that I am not *outside* of the cultural processes I explore, but implicated in them (Bordo, 1993). As I have noted before (Harvey, 2011) while it is important to be mindful of 'navel gazing' or obscuring participants' accounts with our own (Finlay, 2002, p.541), I would argue that a combined diary of this kind can be used as a tool to reflexively understand the data, and how our own experiences are implicated in its interpretation. An additional concern with data of this kind is anonymity. Quotes from my own diary could potentially identify people who would not wish to be identified. As such, most of the insights gained from keeping this diary have fed into the analytical process, and I have quoted only where I think it ethical and worthwhile to do so.

## ***Conclusion***

In this chapter I have outlined the design and implementation of the research, including my sample and data collection tools. I have reflected on some of the challenges and dilemmas I faced during the research process, including questions of power and ethics in research about sexualities. I have discussed some of the advantages and limitations of my research design, and how this relates to the kind of data I collected for analysis. One improvement I would certainly make in future research would be to work towards designing the methods used with the participants themselves, involving the participant earlier in the design of the research (Ritchie and Barker, 2005). In addition, there are benefits and drawbacks to providing participants with written instructions about diary keeping. Instructions run the risk of limiting participant responses, as I found in my pilot work (Harvey, 2011), however verbal explanations alone can be forgotten or perhaps more easily misunderstood. I would argue that a combination of these approaches could work well. Incorporating the notion of participatory design, diary instructions could be written with the participant, and follow up interviews could be organised within a shorter time frame. Having outlined my theoretical and methodological framework for the thesis, the following chapter makes a marked shift into the empirical analysis of the data.

## Chapter 5: Care of the sexual self

I am forever preaching contraception and always demanding that people, young girls in particular, aim higher and demand more of and for themselves.

Jeremy Kyle (2009)

In this chapter I will explore the relationship between discourses of aspiration, self-formation and self-care in relation to condom use. The analysis will focus on the interpretative repertoire I have termed 'care of the sexual self'. This repertoire was used by participants to account for use or non-use of condoms as part of a strategy of care, involving looking after the body and mind to produce the best self possible. 'Care of the sexual self' positioned sexual health at the level of the individual, who was required to take responsibility for their body. As might be expected, self-care involved the avoidance of STIs, HIV/AIDS and unplanned pregnancy. However caring for the self also included *broader* concerns about educational aspiration, career prospects and psychological wellbeing which were linked in participants' accounts to the possibility of becoming infected or pregnant. Condom use was listed alongside other sexual health strategies such as using other contraception, having regular sexual health tests, seeking out information about sexual health and having discussions with partners about their sexual history. Sexual self-care required the development of knowledge about sex and sexual health, surveillance of bodily health and the acquisition of skills like using condoms and communicating effectively with partners.

This chapter will draw on a number of analytical concepts to explore the functioning and ideological effects of the 'care of the sexual self' repertoire. I will begin by outlining my

analytical framework, developing the concept of 'sexual subjectification' (Gill, 2003) by exploring how the care of the sexual self repertoire worked to produce *safer* sexual subjectification in participants' accounts. The chapter will situate this within the existing work on neoliberal discourses of individual responsibility and self-management discussed in chapter two, building on the work of Foucault (2000a), Miller and Rose (2007) and Gill (2003). I will then use this framework to make sense of how the interpretative repertoire worked in participants' accounts, exploring how condom use was constructed by participants within a wider discourse of safer sex.

Following Wetherell (1998)'s approach to discourse as action (outlined in chapter 3), I will explore the specific characteristics of this repertoire in participants' accounts of sex and condom use, looking not only at how but what these particular systems of terms *do* in these moments. The analysis will explore the work that such discourses are performing as participants talk about their own sexual experiences and the sexual experiences of others. Drawing on my theoretical framework, I situate this fine-grained analysis of participants' accounts in the context of wider ideological neoliberal discourses of self-help and individualism. While both male and female participants drew on discourses of self-care, the 'care of the sexual self' repertoire positioned men and women differently in relation to sexual responsibility. In particular, the repertoire positioned women as the common sense protectors of sexual health and fertility, while men tended to be positioned as likely to be resistant to attempts to practice safer sex. In exploring the gendered dynamic of this repertoire, I am building on the critical feminist work discussed in chapter two that has highlighted the ways that girls' and women's bodies are situated as sites for policy intervention and the bearers of social transformation (McRobbie, 2007; Koffman and Gill, forthcoming).

## ***Technologies of caring for the sexual self***

In categorising and labelling this pattern of discourse 'care of the sexual self' I am drawing on Foucault's later work concerned with ethics and the processes involved in the construction of subjectivity, discussed in chapter two (Foucault, 2000a). As I outlined there, Foucault was concerned to explore the technologies that individuals apply to *themselves* as a form of governmentality, an analysis which has been taken up in relation to neoliberal governance by Miller and Rose (2007). This conceptual framework is helpful for examining how discourses of care and individual responsibility are constructed in participants' accounts of condom use. The care of the sexual self repertoire positions the role of *healthy choices* about sex as central to the construction of the self. Situating participants' utterances within a historical context of neoliberal individualism sheds light on both the ideological roots and effects of this particular repertoire. In particular, it enables an understanding of how the repertoire functions to construct sexual subjectivities.

As discussed in more detail in chapter two, Gill's (2003) concept of *sexual subjectification* is useful for thinking through the gendered dimension of governmentality. As I outlined there, Gill argues that the gains of the feminist movement, combined with the rise of neoliberalism and the increasing sexualisation of culture, have changed the positioning of some women within neoliberal culture from sexual objects to desiring sexual subjects (Gill, 2007b). In a shift from more traditional modes of femininity, this new female subject is called upon to be 'up for it' and work on her sexual liberation through consumption and skills acquisition (Gill, 2003; Evans et al., 2010). I am drawing on these analytical concepts to explore how participants' discourses produce *safer* sexual subjectification. This involves the positioning of safer sex behaviours as constitutive of a 'safer sexual subjectivity' through discourses of self-care and individual responsibility for sexual health. The care of the self repertoire positions safer sex as something that requires skills that can

(and should) be worked upon and improved. I explore below how participants justified sexual behaviour in relation to these discourses.

***'Wear a condom to be safe': common sense and safer sex***

In sexual health literature and sexual health promotion in the UK, 'safe sex' or 'safer sex' is used to describe adopting strategies that will minimise the risk of infection or unplanned pregnancy. It is defined in varying ways and includes using barrier methods such as condoms and dental dams, engaging in non-penetrative sexual activities, using non-barrier contraception and negotiated safety, in which partners stop using condoms with one partner after both partners take sexual health tests (Kippax and Race, 2003). As discussed in chapter two, the position of condoms within sex education and sexual health promotion varies across time, national and even local contexts. The complexity of sex education provision was clear in the data, in which participants talked of varying experiences at school, some including reference to condoms and some not. Participants' experiences were also inflected with the policy discourses circulating during their early sexual experiences. Despite this variability, discourses of safer sex were apparent across the data, regardless of participants' accounts of their own behaviour or opinions about condoms.

Discourses of safer sex were often produced in relation to a general principle of safer sex as protection of the self. The following extract is a response to the open survey question 'describe how you feel about condoms':

***Extract 5.1***

'At part of my generation there was no real option but to use them. I guess I'm part of the	1
'AIDS = IGNORANCE= DEATH' generation, which means I was terrified into using them.	2
As a result I have always used them with new partners, and then continued to use them.	3

So I can't compare with not using them. I guess it would be more erotic, more 4  
spontaneous<sup>4</sup>. I'd like to not need to use them, but as they are my insurance against 5  
pregnancy and STI's, then that's the way it is....' 6

(Survey, L, f, mid 30s, bi, WB)

The extract above references an AIDS awareness campaign in the 1980s in the UK, whose tagline was 'If you ignore AIDS it could be the death of you. So don't die of ignorance' (Vitellone, 2008, p.59; Holland et al., 1990). A number of participants referred to government-funded health promotion campaigns or school-based public health promotion in relation to their knowledge of condoms, their own use of condoms or the insistence of partners to use them. In these accounts, safer sex, particularly the use of condoms, was a behaviour that was encouraged by institutions such as schools, health services and policy makers.

For example, Jess is a white, heterosexual woman in her early 20s, living in London. Just after our first interview Jess and her boyfriend stopped using condoms and she started using the contraceptive implant. Jess explained that they had discussed the contraceptive decision and both got sexual health tests before stopping using condoms. This practice has been termed 'negotiated safety' in the literature on sexual health (Kippax and Race, 2003) and is discussed in chapter six. Jess related this process of sexual health decision-making to sexual health promotion messages:

### **Extract 5.2**

Jess: it was definitely weird the first few times it was like (.) like all the things in (\*) I've 1  
been trained to think [LH: m] are going (.) the opposite of what I'm what I'm expecting 2

---

4 I have reproduced the survey responses exactly as they were written in online and hard copy questionnaires, including any spelling and grammatical errors.

LH: and do you feel like whe- do you sort of feel like that training was quite thorough then 3  
 Jess: yeah (.) I don't know if I'm just quite an obedient (.) kind of person that kind of thing 4  
 where you get told in school like don't do drugs you know make sure you wear a condom 5  
 (.) like (.) oh I've never taken ecstasy (.) but I know that if I did I should be sure I drink the 6  
 right amount of water [LH: ((laugh))] I can just imagine myself in that scenario so it's kind 7  
 of (.) (\*\*) thing (.) so (.) it's (\*\*) be like oh I'm going against ((laughing slightly)) what I've 8  
 been told cause I think sex education is pretty much just like wear a condom to be safe and 9  
 like you're not safe if you're not? Um and obviously that's (.) really important for STDs (.) 10  
 but (.) I guess (.) yeah I still feel like a little bit naughty in a way ((laugh)) I'm like it's ok 11  
 because you know we're committed adults who've been tested (\*) you know using birth 12  
 control still so 13  
 (Interview, L, f, early 20s, het, WB)

Jess presents safer sex as something she has been 'trained' in through school (line 2). She also discussed this as a common sense in the community forums she uses to get information about sex (see chapter eight). Unprotected sex is placed here in the same category as taking drugs (line 5) – something cautioned against by institutions of governance such as schools. Condom use takes a central role in this safer sex promotion. Jess constructs her condom use as a result of 'obedience' to the institutions who give out advice on self-protection (line 4). Stopping using condoms therefore has the potential to break the rules of her safer sex training. However, like the advice she has received about ecstasy, the information Jess has received about safer sex includes advice about other ways to protect her health. Getting sexual health tests before stopping using condoms is presented by Jess as similar to drinking the 'right' amount of water when having taken drugs (line 7). In Jess' case, she is able to maintain her discursive position as 'obedient' despite stopping using condoms. The importance placed on the self in narratives of



condom use meant that such stories not only recounted behaviour but constructed different forms of sexual subjectivity (Vitellone, 2008, p.47). Jess uses four justifications to position herself as 'safe': she and her partner are adults, they are 'committed', they have had sexual health tests and they are using an alternative form of contraception (lines 12-13).

Participants produced discourses of safer sex as part of varying accounts of their behaviour and attitudes towards condoms. Safer sex appeared as a common sense trope, reflected in accounts of participants who had widely different views and experiences of condoms. A useful way to illustrate the common sense positioning of condom use is to examine the use of *disclaimers* in talk about condoms. As discussed in chapter three, the safer sex disclaimer appeared in both survey and interview data. The disclaimer appeared as a statement of the general principle of condom use as an important strategy of safer sex alongside statements about disliking or not using condoms, for example:

**Extract 5.3**

“I think condoms are important if you're going to have sex with a new partner/a partner	1
whose STI history you're unsure of. I would never have sex with a new (male) partner	2
whose STI history I was unsure of unless I was using a barrier method, so probably	3
condoms.	4
Having said that, there's not much I like about condoms. Because the majority of my	5
sexual partners have been women, I've never really learnt to put one on. They always smell	6
latex-y and leave a nasty sticky residue on everything they touch.”	7

(Survey, L, f, early 20s, queer, white).

#### **Extract 5.4**

'To be honest prefer the feel without but understand they're important + at the min am not on the pill.' (Survey, O, f, early 20s, bisexual, WB)

As I argued in chapter four, the structure of the safer sex disclaimer is different to those analysed in discursive psychological work on racism, but functions rhetorically like a disclaimer, in terms of positioning the speaker in a positive light in relation to a potentially controversial viewpoint. The safer sex disclaimer highlights the position of condom use in these participants' accounts as common sense in the context of a discourse of safer sex.

Referring to extract 5.3, in the absence of knowledge about sexual history or alternative contraception, the condom is constructed as 'important' (line 3) and the expected behaviour, certainly for heterosexual. The disclaimer operates on a number of levels. In addition to indicating the common sense discursive position of condom use in participants' talk, it tells us something about the kind of response the participant thinks is expected. In the context of an interview about condom use, the participant is required to manage their impression on the researcher (Billig, 1996, p.269) who arguably adopts a position similar to the advice-giving authorities Jess talked about in extract 5.2.

Stories about safer sex behaviour and the use of safer sex disclaimers are not simply reports of behaviour or attitudes. Drawing on Plummer's (2003) work on sexual stories, Vittelone (2008, pp.47–50) has pointed to the way that the telling of 'safer sex' stories function as a 'narrative technique of the self' in which particular forms of subjectivity are made intelligible. In the care of the sexual self repertoire, safer sex was not just about responsible *behaviour* but about the construction of a *safer sexual subjectivity*. Thus using condoms, getting tested for STIs and so on were positioned as markers of 'self-respect' and subject formation – something that a 'safer sexual subject' does through choice to take care

of themselves. In addition, the way that this safer sexual subjectivity was positioned in participants' accounts intersected with the construction of gendered, classed and racialised subjectivity, as I discuss further below.

### ***Confidence and self-respect: constructing safer subjects***

Julie is a white woman in her late 30s. She lives in Oldham. She has multiple partners.

During both of the interviews with Julie, she presented a narrative of becoming more sexually confident, aware of and able to negotiate her own sexual needs and desires.

Condom use was positioned within this narrative as an important part of this self-care. The extract below took place as part of a conversation about how Julie negotiated condom use with partners she met on online:

#### ***Extract 5.5***

LH: m (.) yeah (.) and have you found (.) with um single guys that you've met how does 1  
that negotiation happen what what sort of things (.) [Julie: um] do you have to say to them 2  
Julie: just um make a joke of it usually [LH: m] come on put a bag on it you know and (.) 3  
um (.) have you got some or dyou want one of mine things like that you know [LH: m] so 4  
it's (.) implicit what you mean [LH: m] and (.) they do know they're just tryina get away 5  
with not doing [LH: m] um (.) but they are few and far between [LH: m] and I think I 6  
suppose in the heat of the moment as well (.) it's just being able to step back and say (.) 7  
come on now [LH: ((quiet laugh))] you're not coming near me without one [LH: m] um (.) 8  
and (.) it again it's having the confidence to say that [LH: m] and thinking (.) um (.) you 9  
know respect meself more I think (.) I know what I'm into I like sex [LH: m] and I'm not 10  
gonna put meself at risk for it [LH: m] um (.) so (.) I think (.) it's confidence I think (.) 11  
really but like I said majority of people (.) who use that sort of (.) um site and what have 12  
you are pretty safe keyed up and (.) about it (.) unless it's just I say single lads who think 13

o:a chance of a shag on there and what have you [LH: m] but you can usually tell them and	14
don't bother with them	15
LH: from the profile [or from the chatting	16
Julie: [yeah	17
Julie: both really [LH: m] both really yeah	18
(Interview, O, f, late 30s, bi, WB)	

My question at the start of this extract was in response to an earlier comment that she had made about condom use being the norm or expected for most of the people she had met online, but highlighting single guys as those she had had to 'insist' on using a condom with. Julie presents what seems at first glance a fairly classic gendered narrative of condom negotiation in heterosex that is prevalent in sex education literature and sexual health promotion, in which a woman *insists* that there will be no intercourse unless a condom is used (Gavey et al., 2001). However, Julie's account differs from the gendered accounts of female passivity and male sex drive discussed in chapter two. Developing the confidence to negotiate condom use is a central part of the agentic, desiring subjectivity that she constructs during our interviews, in which she talks about her pleasure at trying many sexual activities and learning about her own and her partners' desires. Julie explains her use of condoms in terms of caring for herself, and her ability to do this in terms of confidence and self-respect (lines 9-11). This is also reflective of sexual health discourses that focus on the development of skills for women to negotiate condom use with male partners (Gavey et al., 2001). In the discourses of self-help of late capitalism, confidence is a skill and resource that can be learnt and worked on to realise individual potential. Drawing on the language of self-confidence and self-respect positions condom use as about much more than an act during sex – it is part of a *psychological* transformation for Julie and her relationship with herself (see Gill, 2009 for an examination of similar discourses of sexual

confidence in a women's magazine).

As noted above, this account could be read as reinforcing a gendered binary of unstoppable male desire and female responsibility in heterosex (Gavey and McPhillips, 1999). *Julie* is the person who insists on condom use in the face of the single lad 'trying to get away with not doing it' (lines 5-6). However, what is different here is that Julie's 'self-respect' is constructed as part of *liking sex* and being knowledgeable about it. Julie's knowledge is not confined to avoiding pregnancy and STIs – indeed, as discussed in chapter four, she used the research diary to draw up a list of the sexual activities she wanted to try. Julie's own desires for sex on her terms are foregrounded in the account – this is not just about her managing a *male* desire for sex. Julie presents this negotiation as something that doesn't just happen at the time of sex, but is part of a series of choices that she makes even when looking at potential partners' online profiles. In her telling of the condom negotiation story, Julie constructs herself as an 'up for it', liberated and autonomous sexual subject (Gill, 2003; Vitellone, 2008, p.48; Evans et al., 2010). Interestingly, Julie presents the need to insist on condom use as a rarity in her recent sexual experiences. The regular members of the website where she meets partners are presented as 'pretty safe keyed up' (line 13) about condom use, unlike the 'single lads' who are presented as less invested in the online community and just after 'a chance of a shag' (line 14). Safer sexual subjectivity is therefore presented as an integral part of membership of the community, and Julie's confident use of condoms is tied up in the performance of her identity as a member.

The care of the sexual self repertoire was also used by participants talking about non-use of condoms. For example, Dan is a white, middle-class, gay man in his mid-20s in London. In our second interview, Dan told a story about a significant change in his behaviour around condom use. The extract below is taken from quite a long account of an experience he

identified as a turning point in his use of condoms:

**Extract 5.6**

Dan: I met I met (.) some guys here and the stuff I was doing like sexual behaviour I had 1  
was just ridiculous incredibly self-destructive (.) and um (.) you know immensely 2  
dangerous and I was just I can't I don't know where I was in my head at the time but I was 3  
j- you know i- it went on for about I think three three or four weeks I just really with 4  
absolute abandon (.) and and I yeah it was really weird and I sort of stopped that um (.) and 5  
then just really sort of (\*) I remember like the thing that did it was like I was ((removed for 6  
anonymity)) (.) um and then we were gonna go to a gay cruising ground which I just never 7  
do because it just strikes me as bizarre (.) and then we took I drove him and he said oh I've 8  
spoken with this other guy and you know we we both wanna well basically like we both 9  
wanna fuck you bareback and I was like oh this is a really good idea like actually all I 10  
could focus on was the experience [LH: m] I didn't (.) like I dunno I dunno I didn't even (.) 11  
how I managed to justify myself that to myself um (.) 12

*[...] later in interview* 13

I'd just was going a bit mad and I wasn't doing wasn't able to focus on anything I had no 14  
motivation where I was living I hated it it was dark and (.) I dunno [m] I felt like a really 15  
(.) I think that's probably the lowest (.) I mean I've been depressed before but (.) that was 16  
you know I was running drastically running out of money and like the only thing I could 17  
do well was casual sex so I was doing a lot of casual sex but I was doing it so much that I 18  
was just doing more and more stuff to get a kind of buzz out of it [LH: mm] it I haven't 19  
really thought about it to be honest Laura so this is kind of good for me to work through it I 20  
think [LH: yeah] but and then so then so that that moment I was like this is insane like I 21  
was like I have to go home sorry I know like and I (\*) like I was apologising and I thought 22  
why the fuck are you apologising this guy wants to have sex with you without a condom (.) 23

(Interview, L, m, mid 20s, gay, White)

This story about a key moment in Dan's life was part of a broader narrative of transformation in our second interview in which he tracked his change from 'self-destructive' (line 2) behaviour, to meeting a partner, engaging in mutual testing for HIV and then stopping using condoms with him. This process of negotiating sexual health testing is discussed in more detail in chapter six. The transformation narrative requires this set-up in which Dan's earlier behaviour is marked as something that needed to change.

Dan presents non-use of condoms for anal intercourse as 'immensely dangerous' (line 2). He reflects on his behaviour as something that was difficult to understand, describing it as 'bizarre' (line 8), 'mad' (line 14) and 'insane' (line 21). Rhetorically, this pathologising language distances the current 'Dan' giving the account from this behaviour, presenting it almost as something a previous, much less thinking self was engaging in. Indeed, from line 21 his account could be read as discursively constructing his decision to leave as an argument between a self that had lost its mind and a more rational, self-caring self that was able to step in at the last minute to prevent him from engaging in even more risky behaviour. Dan's description of his relationship to himself during those times constructs non-condom use as part of a low (line 16). unmotivated (line 15) time. Unprotected intercourse is partly represented as a form of thrill-seeking, in language that reflects dominant discourse on addictive behaviour in which 'more and more' is required for the 'buzz' (line 19). As such, the account pathologises his past behaviour as a product of mental health problems and addiction. Rhetorically I would argue that this constructs condom use conversely as behaviour associated with a good relationship to the self and psychological stability.

The structure of this narrative of transformation is a familiar tale of redemption, in which a shocking moment causes a change in behaviour. This moment could be seen to discursively signal Dan's shift from being a 'risk-taking subject', to a 'safer subject'. Crucially, as with Julie's account above, Dan's account of a change in his condom use is not just an account of a change in behaviour, but a shift in his *relationship to himself*. Non-use of condoms is presented as evidence of a bad relationship to the self, one that cannot be easily understood in hindsight and that requires a great deal of discursive work for Dan to distance himself from.

This discourse of self-care was also drawn on by participants discussing the sexual behaviour of others. For example, Matt is a heterosexual white man in his early 20s, living in London. In the first round of interviews, Matt explained that he thought condoms were 'great', and drew on the 'care of the sexual self' repertoire in describing his own sexual experiences. He positioned using condoms as central to his identity as a responsible citizen. I will discuss Matt's accounts of his own behaviour in chapter six. However, here I want to look at the use of this repertoire in a story Matt tells about someone else's non-use of condoms. In our second interview, Matt expressed surprise that his attitude to condoms hadn't been shared by his co-workers when he had had discussions about sex with them during the diary-keeping period. In the extract below, Matt describes a conversation with colleagues:

**Extract 5.7**

Matt: what else (.) yeah (.) friend of mine well two friend-	friend of somebody who's not	1
really a friend but probably should be a friend (.) they um (.) they hooked up the other (.)		2



evening (.) I was in the office where I work (.) and um (.) there was all this talk about oh 3  
 wasn't it you know gossip about how they got together sort of thing (.) whether or not it 4  
 was a good thing whatever and all that (.) reflections on (.) one another's sexual 5  
 performance and it was (.) um quite cold and callous and um (.) this girl that sits next to me 6  
 was recounting the story of how she'd taken (.) the female in question (.) to ah (.) get the 7  
 morning after pill and I'd sort of gone (.) why (.) and then she went oh well they didn't use 8  
 any (.) protection and I sort of (.) was shocked (.) what? and nobody else was in the sort of 9  
 4 or 5 of us (\*\*) and ah (.) you know these are not people who know each other 10  
 particularly well (.) you know (.) these are people who (.) kind of have met two or three 11  
 times (.) and ah (.) he in particular has a reputation for (.) spreading (.) ah (.) rashes (.) and 12  
 ah 13  
 LH: he has a reputation 14  
 Matt: well I was (.) at least I know I've known him for about five years and she's only just 15  
 met him you see I could've warned her but (.) I didn't know that she was planning on (.) 16  
 letting (.) that happen (.) um (.) and apparently she's been like I don't know if we need to 17  
 go (.) if I need to get the morning after pill I don't think he came in my (.) I don't think so 18  
 anyway (.) it's kind of well that's not really the point (.) you know (.) ah (.) I I found it 19  
 really disturbing and frightening [m] actually (.) and nobody else seemed to 20  
 LH: did you get a sense of how people reacted to your reaction [Matt: yeah] did they find 21  
 that unusual 22  
 Matt: I think they found it (.) well they found it quite funny and endearing that I was so 23  
 conservative about it basically (.) um like oh what a prude or (.) or like you've never taken 24  
 a risk sort of thing (.) ah (.) and I kind of (.) told them that I quite liked my (.) you know 25  
 my genitals not (.) withering away and black (.) um (.) and if they'd like to be infected that 26  
 was up to them but um (.) yeah (.) didn't really win me any favours but no I mean I think 27  
 that they nobody else thought that it no-one kind of said that's pretty stupid but it wasn't 28

like no-one was shocked I was shocked I mean this is a girl with a PhD in ((subject)) (.) 29  
 you know I mean she's not (.) the (.) she's not typecast for (.) someone who would act 30  
 impulsively at all she's incredibly neurotic and ah (.) I thought she had more self-respect 31  
 than (.) to (.) get a disease from him (.) um (.) he doesn't surprise me he's (.) he's a (.) kind 32  
 of a waste of flesh (.) but um that's not the part you're interested in um (.) yeah I think that 33  
 the reaction was ah (.) yeah (.) I think it was kind of a there was a sort of a culture of (.) 34  
 yeah well we've all been there whoops [LH: m] sort of thing 35  
 (Interview, L, m, early 20s, het, White)

In this account Matt's shock is justified in relation to what he sees as a disjuncture between the 'girl with a PhD' and unprotected sex. The problem, as Matt poses it, is that she doesn't carry out her responsibility to protect her sexual health as expected. The woman from the story is represented in some senses as passive – she 'let' unprotected sex happen (line 17) - but this passivity is paradoxically *active* as it is presented as planned (line 16) and impulsive (line 31). The extract illustrates something of the complexity of the gendered construction of safer sexual subjectivity. Getting 'a disease', in this formulation, signifies a *lack* of self-respect. The expectation is that the woman should (and is able to) make 'choices' to protect her bodily health. Importantly, the story highlights the position of condom use not only as a behaviour, but as an indicator of a person's relationship to themselves, formed through their decisions.

It is significant that her decision to get the morning after pill is *not* constructed as responsible by Matt, but rather as an introduction to a narrative about her *irresponsibility*. In a UK context, the 'morning after pill' has been available to buy over the counter since 2001. In 2011, it became available for free for young people under 16 in Wales. Much of the discourse around its availability has focused on the possibility that it will 'encourage

irresponsible behaviour', with the focus particularly on the behaviour of young women (see for example Beckford, 2011). In particular, there is a discursive anxiety around the removal of the need for women to explain their sexual behaviour to a GP when requesting emergency contraception. Paradoxically, although the discursive construction of safer sexual subjectivity relies on the notion of 'healthy choices', the decision to acquire emergency contraception to prevent unwanted pregnancy becomes presented as indicative of an irresponsible subjectivity – constructed in opposition to a responsible subjectivity that *plans* contraception and infection prevention.

In the extract above, Matt's shock is justified by the apparent disjuncture between her behaviour and her educational qualifications. He immediately follows his statement of shock with the justification that she has a PhD (line 29). Her educational achievements symbolise in this moment a successful self-formation on the terms of neoliberal meritocracy, in which achievement at school is the first step on the path to individual success and participation in the workforce (McRobbie, 2009, p.72). Her self-respect is therefore *expected* by Matt. She is categorised in this moment as someone he would not expect to have unprotected sex. As discussed in chapter three, Vitellone's (2008, p.28) analysis of the discourses of condom use in sex education and sex research highlights a narrative of *future orientation* in which particular social groups are positioned as more or less likely to practice 'safer sex'. Vitellone argues that young people from socioeconomically deprived backgrounds are represented in sex education and policy as less likely to do the work of constructing safer sexual subjectivity. In the context of discourses of individual responsibility, taking care of one's sexual health can therefore be understood as part of a project of future-orientation (Vitellone, 2008, p.28). In the story above, there is a discursive tension when someone who displays the *markers* of a future-oriented subjectivity (having a PhD) does not engage in behaviours that Matt presents as

vital for self-care.

The care of the sexual self repertoire was often mobilised by participants in gendered terms. The woman in Matt's story is *expected* to protect the self both in terms of her class position, but I would argue also as a result of her femininity. While some male participants, including Matt, referred to their own condom use in terms of self-care: the expectations about men and women's sexual behaviour seemed to be quite different. For example, Matt represents the man in the story as someone who 'has a reputation for spreading rashes' (line 12) and 'kind of a waste of flesh' (line 33). In the terms of the care of the sexual self repertoire, this man is positioned as someone with an irresponsible sexual subjectivity – but this is presented as something 'expected' from someone who has 'a reputation'. This formulation does not seem to carry the same weight of blame as the female protagonist in the story, as her male partner was not expected to protect his sexual health. This consequently constructs condom use as something that women are expected (or expect themselves) to 'insist' on with male partners. This narrative appeared throughout the data (see for example extracts 5.5, 6.4, 7.3 and 7.15). The gendered construction of this narrative arguably reflects what has been identified by critical feminist scholars as a 'turn to girls' in both policy and popular discourse (Koffman and Gill, forthcoming) and a reproduction of the dominant discourse of female responsibility for reproduction and sexual health (Ashcraft, 2006).

The perceived lack of care shown by the protagonists in the story and Matt's co-workers is used in this account to construct Matt's own self-care. He sets up his own desire not to have 'withering away and black' genitals directly against their apparent apathy about infection (lines 26-27). This could arguably be seen as an example of an 'extreme case formulation' in which an extreme case is used in arguing a point. Pomerantz (1986) examines the use of

extreme descriptions to legitimise claims made by a speaker, such as when a complaint or an accusation is being made. Potter develops this analysis to look at the use of different *terms* to maximise and minimise particular aspects of talk, such as the way statistics can be deployed (Potter, 1996, p.188). Here the extreme case could be seen to both rhetorically emphasise Matt's positioning of his co-workers as irresponsible for not using condoms, and reinforce his own behaviour as common sense in the face of such risk.

Aspiration and self-respect were central to the repertoire of care in the data. Looking after oneself was constructed as respecting not only one's current self, but as central to building a relationship with a future, successful self (Vitellone, 2008, p.30). Participants who talked about their own children and how they negotiated discussions about sex and sexual health with them often situated this within a discourse of education and career aspiration. For example, Sonia, a white heterosexual woman in her early 40s, living in Oldham, talked about what she wanted to see from sex education for young people, including her two children. She was critical about what she saw as attempts by the conservative government to move towards more abstinence-based sex education:

### **Extract 5.8**

Sonia: and actually it's <u>not</u> about abstinence to prevent teenage pregnancy (.) it's not about	1
abstaining from sex (.) it's more about (.) um (.) I don't think what it's about what <u>I</u> think	2
it's about actually <u>can</u> be taught in schools it's more about general attitudes to (.)	3
relationships (.) and (.) the meaning of them and (.) to a degree self esteem self respect (.)	4
LH: this is what you would [ <u>want</u> to be taught ]	5
Sonia: [mm yeah ]and I think um (.) because this is about addressing	6
nothing more than pregnancies well teenage pregnancies anyway (.) that is a whole	7

different area and that's about (.) ((knocking)) teaching (.) young (.) girls to have higher 8  
aspirations (.) (\*) that that is an aspirational thing (.) or that that is even a thing to be doing 9  
(.) at that point in your life (.) and perhaps when they do go out and get find out that they're 10  
pregnant (.) it's not that (.) they've planned it (.) but they haven't not planned for it they 11  
haven't un- they haven't deliberately thought I cannot possibly get pregnant it is (.) 12  
something that could happen and the consequences wouldn't be dire (.) and (.) the 13  
consequences aren't dire anymore because people aren't being (.) don't ever darken my 14  
door again it's like socially acceptable (.) but the consequences aren't dire as well because 15  
of the social (.) they haven't got aspirations (.) they haven't got (.) career (.) progression (.) 16  
routes and things like that (.) that's the sad thing of it (.) so that's what I think about that (.) 17  
um (.) even tories just trying to preach (.) right and wrong and going back to the old (.) 18  
days and stuff that never actually existed anyway so ah (.) (\*\*) that's that ((laugh)) 19  
(Interview, O, f, early 40s, het, White English)

In this extract Sonia presents unplanned pregnancy as something that relates to lack of (female) aspiration. This is a familiar narrative from discourses surrounding teenage pregnancy in the UK, discussed in chapter two. Similarly to extract 5.3, the *lack of planning* in this generalised account of 'teenage pregnancy' is presented as an indication of low self-respect. By *not* planning these young women are positioned as not participating in a deliberate project to create a carefully chosen future for themselves. In the discourse of neoliberal subjectivity, such lack of planning is 'irresponsible'. In this repertoire, caring for the sexual self involves making *responsible* decisions. The decision to use or not use a condom is therefore cast as taking responsibility for the construction of a fully autonomous self.

Safer sex, specifically the avoidance of pregnancy, is presented as related to aspirations

towards further education and career potential. Interestingly, in this repertoire, education and career planning are positioned as both a *marker of* and a *route to* safer sexual subjectivity. This highlights the complex class dynamic of this repertoire, in which telling stories about the use or non-use of condoms constructs gendered subjectivity that is differentiated along axes of class and 'race'. Particular subjects come to be categorised as 'risky' 'irresponsible' or 'unsafe' against those who are 'responsible' and 'safe'. This process of categorisation is discussed in chapter six. The rhetorical importance placed on educational qualifications for young women reflects a historical shift in the position of women in UK society. The last fifty years have seen huge changes in normative family structures, women's access to education and employment. Potential to participate in employment through education and career planning has become one of the key social markers of successful femininity (McRobbie, 2009, p.73). As such, 'teenage mothers' have become a site for sustained policy intervention (Koffman and Gill, forthcoming) (Gill and Koffman, forthcoming, p 15). This shift is profoundly classed and racialised, as working class, black and minority ethnic women continue to experience prejudice and inequality despite the rise in the rhetoric of meritocracy from New Labour to the current coalition government (McRobbie, 2009, p.74).

This is a particularly gendered narrative of 'care of the self' in which taking care over one's reproductive capacities relates to paths of social mobility and discourses of social justice and equality. The ideological work that this does is to position the individual, and more specifically, individual women (or girls) as the site and bearers of social transformation. This is a discursive shift that has occurred not only at the level of national policy, but global development, as girls' bodies have become signified as 'the key to ending world poverty' (Koffman and Gill, forthcoming). As I argued in chapter two, this positions poverty and discrimination as a result of poor choices and lack of motivation, rather than

power and inequality (Koffman and Gill, forthcoming).

My intention is not to produce a deterministic account of the governmental nature of these discourses of care. By pointing to the way that this interpretative repertoire draws on and reproduces neoliberal discourses of individual meritocracy I am hoping to illustrate the way that power operates in the mundane, everyday social construction of condom use. It is important to note that this repertoire was also taken up in pleasurable ways by participants discussing their use of condoms and other safer sex practices. For Julie, her ability to negotiate condom use with multiple partners was indicative of her sexual empowerment. Condom use was constructed as part of being a knowledgeable and 'up for it' woman with confidence and self-respect. As such, discourses of condom use can be understood in this repertoire to be tightly bound up with discourses of female sexual empowerment and agency. As with many feminist scholars, I struggle over questions of agency and power in these accounts. The complexity of shifting norms of female sexuality deny any simple reading of empowerment or oppression. This was particularly clear in accounts where participants struggled over their experiences, in which the ideological dilemmas facing them came to the fore.

### ***Safer sexperts: constructing gendered sexual subjectivity in talk about condoms***

As outlined above, participants telling stories about condom use (whether their own or other people's) were not only constructing accounts of sexual experiences, but doing discursive work in constructing sexual subjectivities. Building on Gill's (2003) work, I argue that this process is one of safer sexual subjectification – in which particular subjects are constructed as 'safe' or 'unsafe'. As I outlined above, the term safer sexual



subjectification implies that subjects are called upon to manage their sexual health as part of a project of self-formation. Thus in the care of the sexual self repertoire, safer sex can be taken up by women as part of 'up for it' femininity in which working on sexual skills includes developing the skills to negotiate safer sex. In some of the women's accounts, taking up this subject position was complex, involving a negotiation of contrasting norms of appropriate female sexuality. For example, Katie is a white British woman in her early thirties in London. She identifies as bisexual, and at the time of the interview was seeing a male partner casually. She loosely defined as working class, and was working in the public sector. The following extract is from our first interview:

**Extract 5.9**

LH: and what's your general opinion about condoms what do you think about them	1
Katie: I've got an in theory and in practice which are different (.) in theory I think you	2
should always have sex with a condom (.) if you're a man and a woman (.) um but in	3
practice (.) I haven't used a condom since personally for many regularly for years and years	4
and years except at the moment when a man's gonna come [LH: mm] which (.) that's more	5
of a contraceptive reason obviously over a (.) um (.) because of sexually transmitted	6
diseases (.) I did use condoms with my ex partner (.) um when I wasn't on any	7
contraception (.) for a little while but he hated them as does the casual partner I'm with	8
now and I don't like them really [mm] if I'm honest I suppose I don't really know how to	9
use them and that when I think I consider myself reasonably sexually experienced [LH:	10
mm] although I've- maybe I don't need to say how many partners I've had but I kn- some of	11
my friends have had lots more than me [LH: mm] and obviously I was in a ten year	12
relationship and I was faithful within that relationship (.) um (.) but yeah so (.) I did have	13
another experience (.) where I'd just (.) s- started seeing this guy and we had sex once	14

briefly without a condom and then the next time it came round I- I brought a condom with 15  
me [mm] but- it's not like I was gonna be all brazen and start rolling it on for him and stuff 16  
like that- I really think that's I don't think I've ever said that to anyone [LH: mm] that- I 17  
mean I know the principles of it [mm] and I know how to take it off (.) and I must have put 18  
one on but it would be very rare that I have [mm] yeah and I think there must be all these 19  
girls out there that are really experienced and know what they're doing ((both short laugh)) 20  
but I don't ((laughs)) yeah 21

(Interview, L, f, early 30s, bi, WB)

In the extract above, Katie positions condom use in heterosex as a common sense, expected behaviour. She generalises her statement that 'you should always have sex with a condom (.) if you're a man and a woman'. (line 3). As with many of the participants drawing on this repertoire, Katie presents the 'theory' of safer heterosex almost as though it was being repeated from sexual health literature as a kind of universal maxim. Like Julie's account above, Katie represents condom use as something that requires particular skills. While Julie foregrounded communication, in Katie's account, being able to use a condom as a woman involves having the sexual knowledge and skill to put it on her partner herself. Indeed, there is a discursive tension in being able to claim to be 'reasonably sexually experienced' while also having difficulties using condoms. To be able to claim sexual experience, in lines 9-10 and 17-20 involves being able to confidently use condoms as protection. Katie negotiates her position in competing discourses of appropriate female sexuality in lines 10-13 – she constructs herself as experienced but not *too* experienced. Her account is constructing a subject position that can exist precariously between 'up for it' femininity, which involves knowledge and experience (in this case how to use condoms), and more traditional notions of female sexuality in which her statement of faithfulness in a long-term monogamous relationship acts as a marker of normative femininity. At line 17

Katie marks out her inability to use condoms as a form of confession; 'I don't think I've ever said that to anyone', which constructs condoms as something that she *should* be able to use and that it would be unusual for her not to. A discourse of care of the self, is coupled here with a technology of sexiness (Radner, 1999) – to be sexy and sexually experienced is to be able to confidently introduce condoms into sex.

As discussed in chapter four, an interview encounter on the subject of condom use is a specifically staged conversation. A conversation like this would more commonly occur in sexual health clinics and GP's surgeries. The interview, and the form that the questions take, in terms of exploring the reasons behind certain feelings and behaviours, position me in a role similar to a health professional, which will have an impact on the kinds of discourses of condom use likely to be drawn on. Later in the interview Katie refers to herself as 'naïve' and 'stupid', and that she feels like using condoms is something she and her partner should do. This kind of language of guilt, embarrassment and admonishment often appeared in the data around talk of safer sex practices. Sexual care and responsibility was constructed in opposition to sexual *irresponsibility*, as we saw in Matt's account of his female colleague's experience above. Such discourses of health responsibility are partly a product of the interview encounter as a space of justification of behaviour. However, the forms that these justifications and blaming (whether blaming of the self or others) take tell us something interesting about the normative construction of condom use as a matter of individual self-respect and autonomous choice, and how this relates to the construction of gendered subjectivity.

The moments of justification in Katie's account point to a particular tension in the construction and maintenance of feminine subjectivity in relation to condom use. Katie positions the female subject who 'rolls on the condom' as 'brazen' – something she cannot

achieve despite being 'reasonably sexually experienced'. Here, rather than hiding her sexual experience as might be expected in more traditional, passive modes of femininity, Katie is confessing her *inexperience*, reinforced by the image of 'all these girls out there that are really experienced and know what they're doing'. To be a sexually experienced and confident woman is therefore presented as *expected* (it is something she has never told anyone before). This signals a new discursive construction of female sexuality, shifting away from a normative requirement to feign ignorance about sex (including not appearing to be too skilled or carry condoms), towards a normalisation of active feminine sexuality, including the possibility of having multiple partners. As I highlight further below and throughout the thesis, this changing sexual norm carries with it new gendered expectations and regulatory discourses, simultaneously introducing new requirements such as the ability to sexily use condoms, while also managing conflicting norms about female sexual respectability. Katie's difficulty in negotiating the moment of condom use without appearing 'brazen' highlights the *impossibility* of these tensions for normative female sexuality. The skills of 'up for it' and self-caring feminine subjectivity are therefore not just about the *knowledge* of how to use condoms, but the ability to use them without stepping over the ever-shifting boundaries of femininity.

Katie constructs the category of the 'brazen' woman as something that the 'girls out there' inhabit – this subject position is risky in terms of female sexual respectability. These 'other girls' are not presented as some minority, but rather it is the majority of women who are 'really' experienced. The boundaries of appropriate femininity appear shaky and uncertain as this is a position she partly claims, but also distances herself from by placing the women 'out there'. This contradiction points to a shift in the social construction of female sexuality that can be taken up in pleasurable ways, as with Julie's account above, but also creates a complex terrain for women to negotiate. On the one hand, Katie's account highlights the

persistence of discourses of passive feminine sexuality and the risks associated with claiming active sexual desire and behaviour, such as those found by Gavey & McPhillips (1999). Certainly, some female participants produced discourses of passivity during heterosexual, particularly in relation to the interpretative repertoire of 'the moment', discussed in chapter seven. However, a discourse of *active* female sexuality was also available to some participants, in which condom use featured as a marker of successful and confident female sexual agency. As discussed above, this was closely linked to discourses of self-formation. Condom use can therefore be understood as one way in which 'up for it' femininity is produced. Interestingly, 'up for it' femininity also played a significant role in justifications participants gave for *not* using condoms, in relation to discourses of pleasure, discussed further in chapter seven.

## **Conclusion**

In this chapter I have explored the construction of the 'care of the sexual self' repertoire in participants' accounts. I have analysed how this repertoire drew on discourses of self-respect and aspiration in constructing particularly gendered norms of sexual subjectivity. What I particularly want to highlight is the way that this repertoire combines discourses of public health and personal responsibility with the language of female empowerment, offering potentially pleasurable discourses of sexual confidence and agency in the negotiation of safer sex, but also producing regulatory effects in which *not* being able to 'roll the condom on' was a source of embarrassment or guilt. The techniques of safer sex could therefore be conceptualised as a form of intimate self-governance relating to broader neoliberal discourses of self-management. I showed how the safer sex disclaimer operated to construct condom use as a common sense and expected behaviour, where non-use of condoms required discursive justifications. In the following chapter I further explore the

complicated relationship between public health discourse and the common sense of condom use, looking at how participants drew on categories of sexual risk in exploring their own and others' condom use.

## Chapter 6: Risky Subjects

In chapter five I argued that in talk about condom use, some participants constructed themselves as 'safer subjects' and others as 'risky' or 'irresponsible subjects'. In this chapter I develop this argument by exploring how participants constructed the category of 'risky subject'. I use a rhetorical discursive approach to explore how participants drew on existing social categories to make sense of their sexual experiences. Participants who used this interpretative repertoire categorised subjects as 'risky' in relation to their sexuality, 'race', gender, age, relationship status, drug use and social class. This chapter builds on the argument made in chapter three about the rhetorical concepts of categorisation and particularisation, and how they can be used to explore discourse and ideology in everyday talk. I argue that in working up categories in their accounts of using and not using condoms, participants discursively constructed condom use as necessary for some subjects and not others. I begin by briefly discussing the role of categorisation in public health discourse. Then I analyse how participants categorised themselves and other people as 'risky', focusing on examples from the data in which the social categories of sexuality, 'race', class and relationship type were used in this process. I argue that in negotiating their own categorisation in terms of safer sex, participants sometimes relied on the construction of the 'safer self' in relation to the 'risky other'. Finally, I discuss the implications of this discursive process for the negotiation of condom use, arguing that such negotiations can be risky themselves as they can carry heavy meaning about individuals and relationships.

## ***Public health and risk categories***

In chapter three I outlined how a rhetorical approach to discourse can provide useful tools to examine the operation of ideology in everyday talk. One of the rhetorical strategies that participants used in talking about condom use was the production and discussion of categories. Billig (1996) has argued that an examination of the discursive strategies that people use to draw boundaries around categories can highlight the contested and shifting nature of the 'common sense' of a particular issue. Labelling individuals, groups, objects or behaviours often carries important implications for the organisation of the social world, as I discuss below. As I argued in chapter three, the placing of something in a category, or arguing for its particularity as an exception, can be a matter of controversy, which can be observed by argumentation in discourse (Billig, 1996, p.172). This argumentation often involves justification as the speaker gives reasons for why their *particular* case is separate from the general category (Billig, 1996, p.173).

In terms of my own data, this concept has been helpful in exploring how participants talked about their experiences of using condoms. In the 'risky subjects' interpretative repertoire, participants explained their own or others' behaviour in relation to their position inside or outside the category of 'risky subjects'. Sexual health research often explores condom use in terms of risk-taking and risk assessment (see for example Martyn and Martin, 2003; Shearer et al., 2005; Hammarlund et al., 2008). Indeed, as I will argue later, this focus on risk in sexualities research and public health policy forms part of the context in which participants construct themselves and others as risky subjects. In focusing on the topic of 'risk' from a rhetorical perspective I am differentiating my analysis from research that has examined individuals' sexual behaviour as a matter of the psychology of 'risk assessment'. What I am interested in here is the discursive work that participants are doing in using



particular categories when talking about their sexual experiences, how particular *subjects* become categorised as risky and what this means for the social construction of condom use. While categories are important tools for making sense of the world, they are not neutral representations, but are constructed and continually re-constructed in participants' talk and relate to existing structures of power and meaning. In producing the category of 'risky subject', participants' talk produces ideological effects, such as pathologising certain subjects as 'irresponsible', 'dirty' or 'unsafe'.

The process of categorisation of populations into categories such as 'high risk' and 'low risk' is a tool used in epidemiology and social policy for research and interventions around the broad area of 'public health' (Waldby, 2007, p.6). As I discussed in chapter two, categorisation has been central to the development of new domains of knowledge about sexuality as populations are divided into subgroups for education, allocation of resources, monitoring and intervention. One of the central characteristics of this process is the creation of hierarchies of risk. In terms of condom use, this categorisation occurs through the dividing up of the population into risk groups around HIV/AIDS, STIs and the classification of particular sections of the community as at risk of unintended pregnancy.

The use of categories in participants' talk to justify or criticise sexual behaviour is not a transparent process of classification. Rather, terms such as 'clean' and 'unclean', 'risky' and 'safe', 'responsible' and 'irresponsible' when applied to sections of the population are produced through a relationship between medico-moral and public health discourse and what Billig et al term 'the lived ideology of everyday life' (1988, p.26). The categories of risk and safety, linked to notions of morality, nation and subjectivity, appeared in participants' utterances about condom use. Common sense constructions, such as the

problematisation of teenage pregnancy, or the inclusion or exclusion of white heterosexuals from the category of HIV risk, justify the direction of education, resources and intervention. As Vittelone (2008, p.6) has pointed out, the object of the condom *constitutes* social identities in relation to gender, 'race', class and sexuality. The process of classification can therefore be understood to not only label objects and subjects, but construct the nature of the things under discussion. Thus risky subjects become associated with immorality, and health is configured into an issue of individual choice, responsibility and blame.

### ***'I think everybody else should use them': categorising risky subjects***

Participants using this interpretative repertoire explained their use and non use of condoms in relation to risk groups, often constructing themselves in opposition to 'risky others'. This was a complex process in which the position as 'risky' or 'safe' was not necessarily stable and could require a great deal of discursive work to manage. For example, during the first interview with Sonia, we talked about her experiences of using condoms when she was younger:

#### ***Extract 6.1***

Sonia: so yeah condoms didn't really stay around for me for that long so then I was about	1
hh 21 22 when we broke up (.) I'm not sure what happened (**) I think that you know there	2
were one or two boyfriends (*) here and there (.) can't remember [LH: m] but I don't I	3
actually don't (.) really (.) even we are in the 80s now (.) and um AIDS is a big issue still	4
but I don't actually think (.) I used condoms all that much (.)	5
LH: do you remember if were you still on the pill and stuff	6

Sonia: yeah (.) yeah (.) and then um (.) so it was a mixture of (.) like short term 7  
 relationships long term relationships over the next few years and I really don't feel that 8  
 condoms have played a big part (.) in my life (.) even though there was the big thing about 9  
 all the risks and stuff (.) kind of think mostly people were of the view that I'm not gay I'm 10  
 not a druggie be alright even though there were instances of HIV (.) in heterosexual people 11  
 really I think (.) 12  
 LH: do you think that was a kind of (.) the message was going out was if you're gay or 13  
 you're a druggie you need to worry about it [Sonia: mm] but if you're straight you don't 14  
 really need to (.) worry so much (.) 15  
 Sonia: I don't know (.) if (.) I think it was clear that it was more prevalent amongst gay 16  
 people amongst drug users (.) I don't think that was the message I think you know there 17  
 was there was a message that (.) if you were heterosexual you were at risk as well [LH: m] 18  
 just (.) I think perhaps there were (\*) messages perhaps there are things I don't know but I 19  
 think (.) people (.) um (.) did (.) yeah (.) I don't know (.) I'm not sure if that was the 20  
 message or not to be honest (.) (\*\*) I don't I don't know I can't even speak for other people 21  
 [mm] I think ((laughing)) [LH: ((laugh))] people I slept with obviously felt (\*\*) but I mean 22  
 I don't know if you were a man (.) who had a different woman every night (.) possibly 23  
 more (.) maybe you would be more careful I don't know might depend on on your lifestyle 24  
 (\*) I think the reality in reality it was (.) more (.) drug users and gay people who were at 25  
 risk (.) I think that has been borne out (.) (\*) but whatever (.) I don't remember (.) condoms 26  
 being a great big thing (.) sometimes sometimes not sometimes I was in a situation they 27  
 were used sometimes I wasn't (.) 28  
 (Interview, O, f, early 40s, het, white English)

Here Sonia presents her own experiences in relation to her position *outside* of a 'risk group'

for pregnancy or HIV. She does not discuss the risk of STIs. Her account can be analysed as one in which she both discusses the characteristics of subjects inside the 'risky' category, and constructs an argument about her own *particularity* in order to justify her non use of condoms. Her risk of pregnancy is managed by her statement that she is on the contraceptive pill (line 7). Sonia presents a tension in her experiences of not using condoms much despite AIDS being a 'big issue' at the time. Lines 10-28 can be analysed as justifications of this tension. Sonia's justifications are made in relation to her non-membership of three 'risk groups'; 'gay people', 'drug users' and men with multiple partners.

Sonia uses a number of rhetorical strategies to construct 'other' subjects as risky. The categorisation of drug users and gay people are presented as from 'out there' (Potter, 1996, p.150) with 'most people' thinking that if you were not in one of these groups you would 'be alright' (lines 10-11). This categorisation appears as something which is contested – Sonia distances herself from the view by presenting it as being held by 'most people' rather than claimed specifically as her personal view. The way that Sonia locates herself throughout the extract above can be analysed discursively as an issue of footing (1981 reproduced in Goffman, 2001). Goffman's concept of footing points to issues of how speakers align themselves to their audience. He suggests that it is useful to consider utterances in terms of the positioning of an 'author' who has selected the words being used, or a 'principal' whose views are being expressed, in addition to the 'animator' who is conveying the words (Goffman, 2001, p.103). When a participant *shifts* their footing, it can be analysed as serving a particular discursive function. Footing shifts that indicate someone *else* was the author or principal of an utterance can distance the speaker from the content of their talk, and so can often be seen in instances where the appearance of neutrality is required, such as news reporting or issues that are considered sensitive or controversial (Potter, 1996, p.144).

In the account above, this shift in footing could be seen to construct the categorisation of HIV risk as a socially sensitive issue. As van Dijk has explored in relation to the denial of racism in talk, social norms about prejudice and discrimination can produce strategies of 'positive self presentation' (1992, p.89) in talk that might be perceived as negative about particular social groups, such as ethnic minorities. Since the advent of AIDS, LGBT campaigners have fought against the stigmatising representations in particular of gay and bisexual people in public discourse about HIV/ AIDS. Footing shifts like those above could signal a common sense understanding that associating particular communities with HIV risk is a sensitive issue that could result in criticism or accusations of homophobia. In addition, this shift produces what Potter has termed 'out-there-ness' (1996, p.150). Constructing a particular statement as though it were from 'out there' positions the risk groups as more *factual* as they appear independent from the speaker, who might otherwise be seen to have something to gain or lose from the description (Potter, 1996, p.150).

Sonia also qualifies this categorisation with the statement that *some* heterosexual people were at risk (line 18). This creates the possibility that Sonia could be categorised in this way, and therefore creates the discursive requirement for Sonia to provide evidence for her particular exception to this category. Sonia presents the notion of risk categories as common sense and external, referring to public discourse about AIDS as a 'big issue' (line 4) with 'big things about all the risks' (lines 9-10). However, she hesitates a great deal when discussing what the 'messages' about risk were. Sonia repeats 'I don't know' four times in this short section, complicating which bodies can be understood as 'at risk'. She shifts from her generalised statement discussed earlier to a comment that she 'can't even speak for other people' (line 21). The uncertainty here could be read as confusion about the kinds of public health messages about AIDS that Sonia came across in the 1980s. However, as

Potter (1996, p.132) has pointed out, displays of uncertainty in talk are not always just about uncertainty but perform a particular rhetorical function, for example distancing the speaker from a particular utterance that could be heard as problematic, in a similar way to the footing shifts described above. From line 23 Sonia introduces a further risk group of men with multiple partners. This possibly resolves some of the discursive tension in the construction of her *own* subjectivity as safe, as she is positioned outside of this 'lifestyle' (line 24). The categories constructed earlier in the account are then reinforced as factual, with Sonia referring to their existence 'in reality' (line 25) and evidence of the categories having been 'borne out' (line 26).

In discussing the existence of 'risk groups', Sonia's talk discursively constructs the subjects she is including or excluding. Importantly, the discussion constructs particular *subjects* rather than *behaviours* as risky; 'drug users' rather than for example needle sharing, and 'gay people' rather than specific examples of sexual practice such as unprotected anal or vaginal intercourse. It is important to note that aside from the attribution to particular subjects, even the process of categorising *activities* as risky can erase local specificity in transmission (Watney, 2007, p.170; Barker et al., 2007). Interestingly, in working herself up as a particular exception to the category, her explanation does *not* give specific detail as to why her own behaviour (or her membership of the group 'heterosexual people') is not (or less) risky. The process of particularisation in this account is therefore one of constructing the self in opposition to the 'risky others' of gay people, drug users and heterosexual men having casual sex. Therefore what is *particular* about Sonia's case, for the purposes of her argument, is that she is outside of these sub-categories of people (Patton, 1993). The construction of these categories is unstable, requiring discursive work such as footing shifts (Goffman, 2001) and constructing 'out-there-ness' (Potter, 1996, p.150) to produce them as truth.

Simon, a white, heterosexual working class man in his mid 40s living in Oldham, also positioned himself as safe in relation to other, risky subjects. The following extract was taken from our second interview. Simon was single at the time of the interview and discussed an experience with one sexual partner since our first interview:

**Extract 6.2**

LH: and did yo:u (.) have you used them (.) before do you	1
Simon: no I never use them [LH: m] I don't need to use them	2
LH: why don't you need to use them	3
Simon: because I'm not promiscuous (.) I don't sleep around	4
<i>[...] later in the interview</i>	5
LH: yeah (.) and how (.) what do you think about condoms then you don't use them what's	6
your kind of general opinion [of them	7
Simon: [I think everybody else should use them I don't think I don't	8
see any reason for me to use them really [LH: m] but then again I also think I'm that	9
fucking unlucky that one of these days (.) I'll actually I'm gonna be one of the ones that (.)	10
that doesn't use them and do it once and fucking end up with a fucking bad bingo call (.)	11
[that a good answer]	12
LH: [does it feel like that like] the luck	13
Simon: yeah	14
LH: bit of luck there (.) yeah	15
Simon: that's a very honest answer [LH: yeah] you can't ask for a better one [LH: yeah]	16
right but as a rule (.) I think people should use them yeah (.) the people that I've heard brag	17
and talk whatever else I think they should wire up [LH: m] other than me (.) I'm alright	18
(Interview, O, m, mid 40s, het, White)	

As discussed in chapters three and five, the 'rule' that 'people should use condoms' is presented here, with Simon positioning himself as an exception to the rule. Participants drawing on the 'risky subjects' repertoire would often follow a statement of the general rule of condom use with a list of exceptions, discussing which bodies or relationships should be included in the 'risk' category. The risk group Simon is drawing on here is people with multiple sexual partners. This extract comes after a description Simon had given about conversations he had heard young people having in which they had been comparing their total numbers of sexual partners. As with Sonia's account above, the boundaries of the category are unstable, with the possibility that he might get 'unlucky'. Simon presents himself as not needing to use condoms (line 2) because he does not have many sexual partners. I would argue that this is not simply an account of a process of risk assessment on Simon's part, but rather the discussion plays a role in Simon's sexual subjectification. He actively constructs himself *in opposition to* the young people who 'brag and talk' (lines 17-18) in his local pub. As these young people are categorised as 'risky', his *difference* to them is given as reason for his non-inclusion in the category, and subsequent exemption from needing to use condoms. Interestingly, the construction of 'everybody else' (line 8) needing to use condoms positions Simon in some sense as the *only* exception to the rule, with everyone but him included in the category of 'risky subjects'.

There is something interesting going on in the way that participants drawing on this repertoire categorise themselves not necessarily in terms of their own behaviour, but in relation to the behaviour or social categorisation of others. Discussions of behaviour that might be considered 'risky' in dominant public health discourse, such as unprotected intercourse, therefore tended to be constructed in quite different ways when a participant's own behaviour was being described, in contrast to the behaviour of others. This created



complex argumentative structures in which social categories such as sexuality, 'race' or relationship type were used to define the boundaries of the broader category of 'risky subjects', depending on where the participant was situated in relation to their own sexuality, 'race' or relationship.

I would argue that this process of risk categorisation can be understood in relation to the normalisation of public health classifications of 'high risk' groups and wider social norms about sexual behaviour, discussed above and in chapter two. From a rhetorical perspective, categorisation can be understood as one tool that participants use to discursively construct the meaning of their sexual experiences and identities. This perspective challenges the notion that talk about risk categories is merely a form of rational risk assessment, but rather looks to the cultural context in which such categories are created and asks *what role* particular categories perform in an utterance.

### ***'I know how they think': 'race', nation and risky boundaries***

As I have discussed above, making sense of condom use by including or excluding people from the category of 'risk' can perform generalisations in which entire social groups, communities and relationship practices are identified as risky. Participants sometimes drew these categories around national borders, in which 'risk groups' became presented not just as 'at risk' but as 'risky populations' (Kippax and Race, 2003, p.2). This reflects global discourses of health risk, particularly as produced through global development programmes operating through an internationalised model of public health (Hirsch et al., 2009, p.8). Postcolonial approaches to HIV/AIDS have pointed to the historical use of public health by the British Empire for colonial control (Sastry and Dutta, 2011). The process of 'othering' through categories should therefore be understood in the context of the

complicated and historically specific social construction of nation, 'race' and difference.

This global process of categorisation has become woven into the practice of public health at the level of sexual health testing and intervention. For example, one participant talked about her experiences in a sexual health clinic after having sex with a partner in an African country:

**Extract 6.3**

Sian: when you go to sexual health clinics in ah in the UK and say that you've had (.) um	1
sex with an African (.) I mean people get really (.) you know (.) I can understand why they	2
do it I guess but I always said and I had protected <u>fully</u> protected sex [LH: m] with a	3
partner from a high-risk from what you designate as a high risk country (.) but you know	4
always completely protected so	5
LH: m (.) and how do you feel about those kind of designations high risk [Sian: yeah]	6
categories	7
Sian: I can un well I mean I can understand why they do it and it's like peace of mind for	8
me because as soon as you tick that box you get like (.) the ((short laugh)) the full	9
treatment ((laughing)) where they don't let you go until you've had absolutely everything	10
((laugh))	11

(Interview, L, f. late 20s, het, WB)

In a rhetorical move similar to that in Sonia's account above, Sian distances herself from the classification of a 'high risk country'. She qualifies her categorisation of the country as 'high risk' by positioning the author of the statement as the sexual health clinic, not her. As with Sonia's account, this externalises the construction of the category, placing it at a site of authority while making Sian less accountable for its production (Potter, 1996, p.143).

Sian explained earlier in the interview that she had used a condom when having sex with this partner. Despite this, which might usually classify the experience as 'safer sex', the experience is constructed by the sexual health clinic in the account as 'high risk' because of the location of the sex and the nationality of the partner. This constructs both her partner and her partner's country as inherently 'risky', regardless of their sexual activities. Sian is constructed as potentially *at risk* because of her relationship to the 'risky other'; there is a suggestion that she does not get 'the full treatment' (lines 9-10) when she usually attends the clinic.

This drawing of the boundaries of risk around national borders reflects the social construction of 'race' in relation to discourses of sexual risk. For example, Abigail is a white bisexual woman in her mid 20s in London. In our second interview she discussed her experiences of using condoms with a partner in a West African country:

**Extract 6.4**

Abigail: in each of these encounters we were using condoms (.) um (.) and he was (.) what	1
was weird was that he said he'd slept with white women before and he was very very	2
goodlooking and he (.) had worked in a was working in a tourist resort so it was it was	3
really very likely that he had (.) but he seemed to not <u>really</u> know anything about condoms	4
(.) like (.) he didn't seem to know how to put them on and he didn't know how to dispose of	5
them (.) so (.) I think after that where he came after he put it on (.) there was this thing of	6
like take it off again and he didn't know about tying it up and was really like (.) ah this is	7
disgusting and like I kind of had to sort it out and (.) um (.) yeah and he was very (.) I	8
couldn't believe that he would've had multiple encounters with white women without using	9
condoms like (.) that just seems	10

LH: you think it would've been more likely with white women than with black women 11

Abigail: yeah yeah definitely (.) um (.long) yeah (.) but I think if he'd (.) slept with lots of 12

black women they probably (.) some of them would've been prostitutes and then (.) they 13

probably wouldn't have (.) probably wouldn't have insisted I don't know if they had it 14

would have kind of come from their position of what it was they did with clients and then 15

he probably has had had like more (.) long term girlfriends in which case he probably 16

wouldn't have used them with them (.) 17

(Interview, L, f, mid 20s, bi, WB)

There is a lot going on even in this short extract. The extract is taken from a much longer explanation where Abigail discusses the structure of casual sex and relationships in the country, in which she explains prostitution is legal and discusses the role of material and financial support in heterosexual relationships. What I want to focus my analysis on here however, is the way that 'white women' are positioned and how this constructs Abigail's own sexual subjectivity. Abigail's comment about her partner's difficulties in using condoms is not presented as surprising in itself, but rather in relation to his assertion that he had slept with 'white women' before (lines 8-9). While there is some discussion about the different kinds of relationship Abigail's partner might have had with black women, the category of 'black women' is set up here in opposition to 'white women' in their knowledge and ability to negotiate condom use. As discussed in chapter five, it is *women* who are constructed with the expectation to *insist* on condom use. The particularly racialised nature of this construction is foregrounded here to highlight that it is specifically *white* women who would be expected to insist on condom use. The agency of both the hypothetical white women and black women in the account is constructed in relation to their 'race'. The expected insistence of previous white women constructs white women as knowledgeable and in a position of relative power for negotiating condom use in contrast to the black

women in the story. As much of the research literature exploring the negotiation of condom use in multiple different national contexts suggests, such negotiations and their representations are locally specific and relate to structures of power, the organisation of labour (including flows of migration) and social norms about condom use (Hirsch et al., 2009). Abigail's account highlights this complexity in terms of her partner's work in a tourist resort, her perception of local structures of relationships and her own movement across borders.

Abigail's construction of 'race' here draws implicitly on discourses of white 'Western' women 'at risk' when having sex with black African men. As highlighted in Sian's account above, such discourses can be found in sexual health promotion in the UK. Public health statistics cite that the highest rate of new cases of HIV each year in the UK are acquired overseas (Terence Higgins Trust, 2012). Global discourses of HIV and AIDS have been critiqued for collapsing the complex differences in local contexts as a process of 'othering' with its roots in European colonialism (Beth Ahlberg et al., 2009).

It is important to note that the narrative about Abigail's partner's sexual history is not an account of a conversation they had, but rather a hypothetical narrative of possibilities. The repetition of 'probably' and 'I don't know' highlights this, positioning the account as a common sense construction of condom use in that context; it is what Abigail says she would *expect* to have happened. This account constructs Abigail as a safer sexual subject, formed at the intersection of her 'race' and 'gender'. Whiteness is constructed simultaneously as at risk, but able to negotiate safety through skill, agency and power; it is Abigail who knows how to use and dispose of condoms, and white women are given as the expected source of this information for her sexual partner.

The account above illustrates the complexity in the construction of racial and national boundaries in talk about condom use, and how these link to contextually specific histories and relations of power. Such boundaries do not always map onto geographies, however. The account below is from Dave, a black British heterosexual working class man in his early 40s in London. In our first interview, we talked about Dave's concerns about his daughters:

**Extract 6.5**

LH: and do they have like boyfriends and things [like that]	1
Dave: [well that's the thing] that's the thing cause	2
she's got a boyfriend I mean they don't live with me or anything like that [LH: mm] but (.)	3
you know they let me know what they're doing and blah blah blah things like that but they	4
um they've all got boyfriends (.) you know w- you know if I had my own way ((v short	5
laugh)) I wouldn't let them have em for now (.) you know I'd say to them sort out your	6
education (.) you know try and go to uni [LH: mm] do something constructive first (.) you	7
know sort of thing because they're very young [LH: mm] but at the end of the day what-	8
you know I've still got- whatever decision they make (.) I've still gotta um be you know	9
what I mean by their side [LH: mm] and support them in every way (.) so much as I didn't	10
like it or I don't like it [LH: mm] you know but I don't want to lose them cause they're my	11
girls you know what I [mean]	12
LH: [yeah] (.) what is it you- you worry about about them getting	13
pregnant or=	14
Dave: =yeah [LH: mm] yeah well two of them's already preg- two of them's already had	15
kids [LH: oh yeah yeah] you know I was hoping that might- she's quite sensible my	16
youngest one I was hoping she don't go down that road [LH: yeah] her boyfriend seems	17
sensible (.) he's a white guy turkish he seems very sensible you know and I do like him as	18

well and he's going to uni doing things like that so [LH: yeah] I'm quite glad [LH: mm] 19

that she's settled because the other two girls are not settled [LH: yeah] you know= 20

LH: =how do you mean not settled 21

Dave: well (.) they they boy- their fathers not (.) not with them [LH: mm] you know they're 22

not with them so so that that's why you know sort of worry about them [LH: mm] you 23

know I say to my daughter don't get pregnant again you've got one one's enough you know 24

sort of like take your time 25

(Interview, L, m, mid 40s, het, Black British)

Dave draws on the care of the self repertoire discussed in chapter five. The risk presented is that Dave's youngest daughter will get pregnant, and his older two daughters will have more children. As outlined in the previous chapter, the care of the self repertoire positions education as an important factor in pregnancy prevention. Dave here describes education as 'constructive' (line 7). implicitly presenting pregnancy as not constructive. Dave classifies his daughter's boyfriend, the 'white Turkish guy' as 'sensible' (line 18). His plans to go to university are used in this narrative in contrast to the possibility of pregnancy. Indeed, the *boyfriend's* aspiration to go to university is positioned in the account as potentially preventing his daughter from going down the same 'road' as his older daughters. University could be seen as discursively signalling his daughter's boyfriend's class position (or potential future class position). Dave's inclusion of a description of her boyfriend's nationality and 'race' is particularly interesting when contrasted with the extract below from our second interview:

#### **Extract 6.6**

Dave : but it's hard enough babe because you can always tell your kids like I told my kids 1

you know don't get pregnant you know (.) I even said to one of my daughters do not go out 2

with a yardie guy (.) yeah (.) please do not go out with a yardie guy (.) when I say yardie 3  
guy a guy that comes straight from Jamaica (.) you know things like that so she did the 4  
opposite (.) she went out with one and what did he do? He don't want he doesn't want to 5  
know the child (.) because because I know how they (.) they (.) think (.) they go from 6  
woman to woman and think like that they're having kids all over the place (.) so when that 7  
happened my daughter turned round and said dad I wish I listened to you I said babe I was 8  
only trying to tell you (.) you know (.) but look at that now he doesn't want to know your 9  
child (.) 10

Dave constructs first generation Jamaican immigrants as particularly risky for his daughter. Dave accounts for the behaviour of his grandchild's father by categorising him as a 'yardie guy' (lines 3-4). Both of Dave's parents are from Jamaica, he was born in the UK and identifies as British. Dave draws on cultural narratives of 'race' and class rooted in the history of Jamaican immigration in the UK. In the account above Dave constructs the 'yardie guy' as someone who has multiple partners and cannot be relied upon to stay if a partner becomes pregnant, generalising that 'they're having kids all over the place' (line 7). The term 'yardie' has a long and complex history. Referencing classed discourses of the government-built social housing 'yards' in Kingston, Jamaica, the term is often used to signify a particular stereotype of working class black masculinity and is mobilised in racist discourse about Jamaican migrant communities. The use of this term is complicated however, as it can be taken up in multiple and contradictory ways, such as its use in some dancehall music and 'yardie' literature (Farred, 2001). Here the term could be understood to draw classed and racialised boundaries around different sections of Jamaican migrant communities in the UK.

Dave's rhetorical separation of his own Jamaican heritage from that of the more recently



migrated 'others' in his account is particularly interesting in relation to his own experiences of fatherhood. In our second interview, Dave talked about each of his three daughters having been unplanned

**Extract 6.7**

LH:did you kind of did they <u>say</u> that they were on the pill or	1
Dave: yeah (.) they did (.) that's what made me feel (.) relaxed (.) a lot eas- you know (*)	2
think wont get pregnant because they told me they were on contraception I saw the box of	3
tablets they were taking so (.) so when they did get pregnant they said ah well they didn't	4
work (.) tablets so what can I do (.) but I knew it was sort of like (.) just to sort of trap me	5
(.) at the time why they did it you know but it still didn't work out cause I still ended up	6
leaving both of them (.) anyway I didn't go out with them all at the same time (.) one after	7
each other sort of thing [m] and that (.) but I mean (.) you know I don't regret my kids (.)	8
cause I had them young (.) and I'm still young with them (.) [LH: m] you know and I	9
understand what they're going through	10

It is important to note that just before this extract Dave discusses his feeling of being 'trapped' in relation to his non-use of condoms, reflecting that some of the responsibility for contraception was his. However, in this extract he returns to the narrative of entrapment, which appeared a number of times in different participants' account in relation to anxieties from men about women deceiving them into having a child. What is particularly interesting is the way that Dave pathologises the generalised 'yardie guy' for leaving his daughter, but categorises his *own* experiences of unplanned fatherhood in relation to his partners' deception. I would argue that this highlights the *dynamic* way that categories were mobilised by participants to position themselves in a particular light. In this account placing blame on the mother of his children facilitates Dave's narrative of fatherhood as a

predominantly positive tale of overcoming adversity, going on later in the interview to talk about his protective relationship with his daughters and the things they share in common. Interestingly, Dave's narrative of the 'yardie guy' does not seem to offer space for the possibility that his granddaughter's currently absent father might build a relationship with her in the future. This further highlights the way that categories were used to construct both behaviour and identities as 'risky' or 'not risky' in relation to the speaker's own social positioning. In order to separate the self from the category of 'risk', further categories (such as the 'deceptive woman') could be seen to be used to redraw the boundaries and exempt the person speaking.

Dave's accounts of both his daughters' boyfriends and his own experiences above illustrate the way that membership of particular social categories are constructed as 'risky' or 'safe' in talk. This is gendered as his daughters inhabit the position of 'at risk' or 'safe' in relation to particular forms of classed and racialised masculinities. Similarly to Sonia's reference to the categories being 'borne out', Dave presents his daughter's experience as evidence that all recently migrated Jamaican men are 'having kids all over the place'. In Dave's account the father of his daughter's child was inevitably not going to want to know her child because of his class and 'race' position, while this is discursively positioned as 'other' to both his own social position, and that of his daughters. This representation is in tension with his account of his youngest daughter's white Turkish boyfriend, who is positioned as aspirational, potentially middle class and therefore 'sensible'. This highlights the importance of understanding the use of risk categories in terms of the historical and cultural context in which they are produced. From the perspective of a feminist discursive analysis, such categories can be understood to construct not only sexualities but gendered, racialised and classed identities.

## ***Managing class***

Participants used discussion about condom use to discursively construct classed subjectivities, including constructing their own class position through talk of 'risky others'. As I argued in chapter five, social class was mobilised by participants in discourses of sexual self-management, aspiration and responsibility. In order to explore this further I will turn now to Matt's account of his own condom use, in contrast to his reflections of other people's non-use of condoms, discussed in chapter five. Matt presented non use of condoms and particularly pregnancy as irresponsible, set against his own condom use as a form of responsible citizenship and self-formation:

### **Extract 6.8**

- LH: =you have a proud moment a political [moment when you (\*) condoms] 1
- Matt: [yeah it's one of very few] political moments in 2  
my life [LH: mm] yeah it is (.) 3
- LH: and you but you find them annoying 4
- Matt: well I mean (.) you know (.) I think that they sort- I guess (\*\*) it's not like I'm totally 5  
without compassion for the person who can't ha you know they ruin the moment of they 6  
make me lose my erection or they're too tight or they're too lose or they rip (.) because all 7  
those things are true (.) I mean those things do happen (.) if you use them (\*) it will a 8  
certain percentage of the time (.) your kind of enjoyment with be sacrificed- but it's worth 9  
it (.) ((laughing)) it's a small price to pay [LH: ((quiet laugh))] to not have to be a single 10  
father raising a child in ((UK county)) BNP ((UK county)) 11
- (Interview, L, m, early 20s, het, white)

The county that Matt mentions is in South East England. He was living there at the time of our first interview, from which this extract was taken. He had earlier described his local

area in relation to the British National Party (BNP) which he makes reference to again here. The BNP is a far right nationalist, anti-immigration party. It emerged in 1982 after a split with the more militant far right National Front. At the time of our interview the BNP had made some notable gains in local elections, including the Greater London Assembly in London. In describing his local area as 'BNP ((county))', Matt is not merely describing the political landscape of his local council and voting preferences in his area. In the UK the BNP characterises itself as a party that represents the interests of the white working class. The reference to the BNP could therefore be seen to serve partly as shorthand for a particular form of white working class masculinity.

The risk described by Matt here is not just the risk of a partner's unintended pregnancy, but the possibility of becoming a single father in a working class area, which could be read as an extreme-case formulation (Pomerantz, 1986), used to emphasise Matt's argumentative position. The unusual phrase 'single *father*' emphasises the scenario as a dramatic possibility: the phrase 'single mother' signifies a particular discourse around class and gender in the UK, which Matt's phrase both draws on and disrupts. The material likelihood of this hypothetical scenario is starkly gendered. As discussed in chapter two, the dominant discourses of working class single parenting in the UK tend to focus on the fertility and parenting abilities of working class women. Indeed, in our second interview, Matt discussed the gendered difference in the ability of male partners to abandon female partners in the event they become pregnant.

I would suggest that this extreme case formulation is also pointing to a social anxiety around the permeability of class boundaries. Matt presents not using condoms as a potential source of risk to his future subjectivity. Condom use, therefore, is not only represented as a marker of responsible citizenship by Matt, but is also used to mark out the

edges of classed and racialised social categories. These individualised discourses of condom use relate to the discourses of self-care, future orientation (Vitellone, 2008) and self management discussed in chapter five. Similarly to the examples given above, Matt is constructing his sexual subjectivity as 'safer' in relation to 'risky others'. However, it is important to point out that participants used these categories in different ways. For example, while Matt constructs condom use as central to maintaining this safer subjectivity, Sonia presents her membership of a 'safer' category as a reason *not* to use condoms. The use of categories in participants' justifications about their experiences must also be understood in the performative context of an interview about condom use.

One of the ways in which classed categories were constructed in participants' talk was in relation to classed representations in popular media. For example, the extract below came after Katie had brought up *The Jeremy Kyle Show*, a UK daytime television talkshow in the UK:

#### **Extract 6.9**

- |  |    |
|--|----|
| LH: and what's your kind of (.) what do you think there is there an overall message that         | 1  |
| comes from trisha and jeremy kyle about (.) sex and (.) [LH: m] pregnancy and condoms            | 2  |
| and do they talk about (.) do you get a sense of them talking about STIs or (.) what context     | 3  |
| is it (.) coming up in   | 4  |
| Katie: no not so much STIs more about the pregnancy (.) um (.) I think they're quite             | 5  |
| hypocritical (.) actually (.) especially jeremy kyle I see the glint in his eye when you know    | 6  |
| it's as bad a situation as possible he's thinking ratings great um (.) and he says all the right | 7  |
| things but he doesn't actually mean them but (.) [a  | 8  |
| LH:  |    |
| [and what are the right things that he says  | 9  |
| Katie: put something on the end of it don't go round you know you know to women don't            | 10 |

go round sleeping with everyone um (.) kind of you know kind of (\*\*) on benefits who 11  
 don't have jobs there's kind of stigma attached to all that that you know you're having all 12  
 these kids and you haven't even got a job (.) um (.) obviously unemployment is massively 13  
 on the rise anyway (.) but it's kind I suppose it's often uneducated people (.) who are (.) 14  
 don't have any money because they're on the dole and just scrounging off the taxpayers 15  
 who have these children willy nilly I think it's- you know quite class [LH: m] thing 16  
 actually (.) yeah (.) I I don't know whether I've ever really thought about it like that I think 17  
 that's probably the sort of message- maybe not not so much trisha I'm not so sure about 18  
 ((laughing slightly)) don't watch that so much but (.) yeah (.) but that that's amazing to me 19  
 that they're really the only programmes that you see (.) that (.) at least allude to it just not 20  
 and actually blatantly mentions (.) [LH: m] the use of contraception including condoms 21  
 (Interview, L, f, early 30s, het, WB)

I discuss the representation of condoms in *The Jeremy Kyle Show* in more detail in chapter eight. The guests on the show are usually white and working class. Here the narrative of unemployed working class women having children 'willy nilly' (line 16) is similar to Dave's construction of first generation Jamaican men 'having kids all over the place' (extract 6.6). A class-based discourse about the relationship between education, employment and pregnancy is produced here, with a particular kind of working class female sexual subjectivity constructed as irresponsibly fertile. The framing of fertility as a public health issue positions 'responsible choices' as not only important for individuals, but for the health of society. In the extract above, working class (specifically unemployed) femininity is framed as risky for society; multiple children are presented as a drain on social resources as it is 'taxpayers' money' (line 15) that will be needed if more children are born.

Katie presents herself as savvy and critical of Jeremy Kyle, but also situates his perspective as 'saying all the right things' (lines 7-8). Katie therefore distances herself from constructing working class femininity as risky while also naturalising the category as common sense through her talk. From line 11 it is difficult to locate the origin of the position taken. Katie describes the classed and gendered discourses of sexual responsibility in *The Jeremy Kyle Show* as stigmatising (line 12), is critical of Jeremy Kyle's motives (lines 6-7), positioning herself as a knowing and critical viewer. However the construction of uneducated people as 'scroungers' (line 15) is located in a complicated way both as the 'message' of the show but also a phenomenon in society that Katie holds an opinion on.

Rhetorically this serves a similar purpose to Sonia's footing shifts we explored earlier in the chapter – the speaker is able to distance themselves from the utterance, constructing it as external and therefore reducing their accountability for potentially controversial views. *The Jeremy Kyle Show* is a controversial show in the UK, having been described by one judge as 'human bear baiting' (Davies, 2011). It adopts a curious position in UK mainstream discourse, on the one hand denigrated as a form of 'low culture' but also invoked at times to symbolise particular discourses of national crisis, with terms like 'the Jeremy Kyle generation' used in media and political representations to signify 'feral' or 'underclass' working class subjectivity (Davies, 2011; Kirkup, 2008).

This formulation of the participants on *The Jeremy Kyle Show* as 'underclass' (Davies, 2011) is significant for making sense of how Katie categorises herself in relation to the show. Katie identified herself as working class and at the time of our second interview she was unemployed, although she talked about hoping to have some temporary work in the near future. During the interview she discussed her own inconsistent condom use in terms of her concerns that she might have fertility problems, signalling her difference from those

able to have children 'willy nilly'. Katie expressed some desire to have a child, though this was complicated by financial concerns because of her unemployment. She distanced herself from the discourses on *The Jeremy Kyle Show* as a programme she 'looked down on', presenting it as preying on vulnerable people, while positioning herself as *different* from the risky and vulnerable 'others' on the programme. However, despite this difference in class positioning, Katie constructed her own difficulties in using condoms, as discussed in chapter five, as 'reckless' and 'irresponsible', drawing on the interpretative repertoire of care of the self reflected in *The Jeremy Kyle Show*. Membership of particular categories was consequently not straightforward, with participants distancing themselves from 'risky others' by drawing and redrawing the criteria for classification.

### ***'I'm not a dog': symbolism of condoms***

The association of condoms with risk had discursive implications for participants accounts of themselves and others. Condom use was presented by some participants as only required for a certain 'type of person', thus carrying meanings for both the participants' subjectivity and that of their sexual partners. For example, Elizabeth, a white British middle class heterosexual woman in her early 30s in London, discussed talking about sexual health testing with her partner:

#### ***Extract 6.10***

Elizabeth: I ended up having the injection? [LH: oh yeah] the contraceptive injection so	1
there's no need (.) to use condoms but (.) then I told him (.) and it was really weird (.) and	2
that was fine (.) but then (.) what were we watch- we were watching something on	3
television it wasn't until there was something on television (.) that I eventually plucked up	4
the courage to say well we don't use any con- any condoms so you know have you ever had	5
any sexual health checkups (.) but it was a while afterwards and I think I just put my faith	6



in him that he doesn't appear to be the kind of man that (.) sleeps around a lot or has done	7
or (.) puts him at a higher risk of having any (.) ((laughing)) sexually transmitted diseases	8
((laughs)) quite a yeah (.) so I didn't you know I didn't sort of press him before then but	9
then he it was very good actually he went and had a check up the next day and [had all the	10
LH:	[oh right 11
Elizabeth: tests done (.)	12

(Interview, L, f, early 30s, het, WB)

In this account, it is the 'kind of man' that her partner is (line 7) that is highlighted by Elizabeth as a marker of his potential safety. As with the accounts above, this categorises sex with multiple partners as inherently risky (rather than for example unprotected vaginal or anal intercourse). This marker of safety seemingly does not *prevent* Elizabeth from asking her partner if he had had a sexual health checkup, indeed she says that he got the checkup the following day. However, bringing up the issue of sexual health required courage (line 5) and a prompt of a documentary on television about AIDS. This discursive tension in Elizabeth's account highlights potential difficulties in negotiating safer sex in relation to categories that could imply that a partner is a particular kind of person, or not to be trusted (Waldby et al., 1993).

Similarly, in the following extract Simon discusses a sexual experience he had during the diary keeping period:

**Extract 6.11**

Simon: anyway I've got nowt to tell you (.) so (.) same as last time (.) I'm celibate (.) I had	1
a bit of a fling and that's about it and I didn't use a condom cause I knew who it was	2

LH: right that was in the last six months you had a fling	3
Simon: four months ago or something	4
LH: yeah (.) and you [(**)	5
Simon: [(**) I knew who they were ((cough)) whatever else I knew they	6
didn't put thereself around a lot so I didn't bother [LH: mm] trusted em and they said they	7
were on pill so	8
LH: yeah (.) they were on the pill (.) and do you did it um (.) did it come up in	9
conversation with them (.) have you slept with them before	10
Simon: no but they know I'm pretty safe [LH: yeah] same as I know they're pretty safe	11
[LH: yep] you know what I mean they know me they know I'm not a dog basically [LH:	12
yeah] I don't sleep around	13
LH: yeah and do you um (.) is that something that you actually have a conversation about	14
or is it just kind of this unspoken (.) thing (.)	15
Simon: we're just dead open with each other we know each other [LH: m] that's all [LH:	16
yeah] I know she she's not a dog she knows I'm not a dog [LH: m] and we just have a bit of	17
a laugh all that [LH: m] not intending on going anywhere and it didn't go anywhere [LH:	18
m] on both sides [LH: m]	19
(Interview, O. m, mid 40s, het, white)	

Similarly to the accounts above, Simon categorises both himself and his sexual partner as 'pretty safe' (line 11) – the risk of pregnancy is presented as low because his partner said they were on the pill. Simon categorises himself and his partner as safe because they don't 'sleep around' (lines 7 and 13). Sex with multiple partners is therefore conversely constructed as 'unsafe'. In this way, Simon presents his experience as safe because he and his partner are positioned *outside* of his construction of the risk category. Importantly, 'sleeping around' is presented as something a 'dog' would do, reflecting moral discourses

about sexual promiscuity. Membership of 'risky' categories was often characterised by participants as negative, with 'othering' of particular social groups forming moral hierarchies of sexual subjectivity. Such hierarchies work to construct condom use in Simon and Elizabeth's accounts above as something only required for sex with a 'dog' or the 'type of person' who engages in risky behaviour.

This symbolic role of condom use as signifying a particular kind of person sometimes mapped onto the categorising of subjects not only as 'risky' or 'safe' but as 'dirty' or 'clean'. For example, participants talked about the results of STI tests being 'clean' and of knowing that people they had sex with were 'clean':

**Extract 6.12**

Hakim: well actually in if you know UK is the most clean country in Europe I don't know	1
if you know that [LH: is it] yeah for the HIV you know for all other infections about	2
woman you know chlamydia all them kind of stuff UK is the best one is not many people	3
have HIV and chlamydia stuff like that [LH: m] for example you go to Germany France uh	4
Holland Sweden Greece Spain everywhere they have loads of people loads of people like	5
that [LH: m] but in the UK there's actually not many (.) not many [LH: mm] so that's	6
sometime make me believe don't use a condom [LH: mm] you know (.) but (.) most of the	7
time when I meet a girl first time straightaway it is very hard to me not use a condom first	8
time we have a bit of fun I get to know her find out if she clean and then I don't use a	9
condom [LH: mm]	10
LH: so how do you find out if she's clean (.) is that by talking to her or=	11
Hakim: =talking to her (.)	12
LH: and do you talk about how many people she's slept with [and that sort of stuff	13
Hakim: [yeah	14

Hakim: I go deep inside her (.) deep inside you know trying to (.) convince her I'm not a	15
bad guy you know just want a bit of fun that's all [LH: mm] I don't want to do something	16
I'll regret [LH: mm] I tell her if you're not clean please tell me we can go buy some	17
condoms [LH: mm] that's it	18

(Interview, O, m, late 20s, het, Middle Eastern)

Hakim is a heterosexual, first generation migrant from a country in the Middle East, in his mid-20s, living in Oldham. He constructs HIV and STI risk here as a matter of 'cleanliness'. Cleanliness is not just characterised as an issue for individual subjects, however. Similarly to extracts 6.3-5 above, Hakim draws boundaries of sexual safety around national borders, presenting the UK as 'clean' in relation to other European countries (lines 1-6). Condoms become framed as something to use when someone is considered not clean (Waldby et al., 1993; Lupton, 1994). Following Vitellone's (2008) argument that condoms constitute sexuality, their suggestion and use therefore carry the possibility of constructing a sexual subject as 'unclean'. In our second interview, Hakim talked about having contracted genital warts during the diary keeping period. In our discussion about this, the complexity of conceiving sexual health as an issue of cleanliness was highlighted as Hakim talked about his previous sexual partners having appeared clean. Hakim talked about this experience changing his attitude towards condoms, but conversely said he had *not* started using condoms with his current partner, despite still having genital warts. He explained that this was because she appeared not to have them thus far, so he didn't think condoms were necessary, further pointing to the role of 'appearance' in the construction of sexual safety.

The mobilisation of categories is a discursive act that plays a role in the construction of sexual subjectivity. While my discussion here has focused on the detail of participants'

language, the accounts above highlight that these categories are used to make sense of material bodies and practices and can mark them in visceral ways in relation to notions of disease, danger and dirt.

The feminist rhetorical approach I have employed here points to something interesting and new in relation to the issue of risk categories in talk about condom use. Existing research has explored some of the way that social norms about risk are taken up in people's talk and sexual practice. Such research has looked in particular at the stigmatisation of gay and bisexual people (Kippax and Race, 2003) and difficulties faced by women in negotiating condom use in the context of conflicting norms about marriage and infidelity (Hirsch et al., 2009). However this work has not taken such a fine grain approach to the ways that these categories are constructed and contested through argumentation in talk. Looking at the detail of talk reveals the unstable and blurred boundaries (Billig, 1996, p.176) of discourse about risk, and highlights how the 'common sense' of which behaviours and identities are positioned as 'risky' shifts depending on what a particular utterance is attempting to do. For example, Dave's drawing of racialised and classed boundaries around a particular construction of working class Jamaican masculinity work to construct his daughters' and his own experiences in a particular light as 'at risk' and 'safer' respectively. As such, categories can be used to apportion blame, exempt the speaker or justify particular behaviours.

### ***'A nice thing to do for each other': condoms, testing and intimacy***

Much of the research on sexual negotiations has highlighted the role of condoms as symbolic in the construction of particular types of relationship, particularly a change in relationship from 'casual' to 'long term' or as a symbolic representation of monogamy (see

for example Hollway, 1989; Holland et al., 2004). Similarly, Conley and Rabinowitz (2004) have explored the symbolic role of condoms in what they identified as 'normative transition scripts' used by heterosexual couples switching from using condoms to the contraceptive pill. I have argued above that participants discursively constructed their own sexual subjectivity in relation to 'risky others'. Some participants used a similar rhetorical strategy to discursively construct their relationship as 'safe' in contrast to other, 'riskier' relationship types.

For example, the following are examples of responses given to a survey question asking participants to list how important STI prevention was in their decision to use condoms, and explain why (see Appendix G). These respondents ticked the 'not an issue for me' box;

'Married' (O, f, mid 40s, het, WB)

'I have been with the same partner for 5 years' (O, f, early 20s, het, no ethnicity)

The existing literature on sexual negotiations has extensively explored how married or long term monogamous relationships are constructed as 'safe', particularly in relation to the role of not using condoms as a marker of *trust* and *love*. In Hirsch et al's cross-national analysis of HIV risk, they found that 'rather than using a condom as an element of safe sex, men and women commonly strive to avoid using condoms to demonstrate that the sex they are having is already safe sex.' (2009, p.19). They argued that in some circumstances romantic love could therefore be considered a 'risk factor' for HIV. In this categorisation of relationships, the 'riskiness' of casual sex is therefore contrasted with the 'safety' of 'knowing someone':

**Extract 6.13**

Sonia: I think the only time I would use a condom (.) is if I was with someone who I'd never met who I'd just met you know or it like was in some sort of one night stand scenario or anything like that then I would

(Interview, O, f, early 40s, het, white English)

Using condoms can be understood therefore not simply as a decision that is made when having sex; it carries meaning about the people involved in the encounter and the relationship between them. In these discourses, condom use is associated with casual sex as more 'risky'. Sonia's comment and Simon's account above chimes with existing research findings in which participants described 'knowing someone' as a reason not to use condoms (for example Holland et al., 2004). However, sexualities researchers have identified an alternative practice termed 'negotiated safety' in which partners stop using condoms for intercourse after receiving negative sexual health tests (Kippax and Race, 2003, p.3). Negotiated safety involves an agreement that partners will not engage in unprotected sex with other partners. A number of participants discussed negotiations like these with their partners. For example, In our first interview, Julie explained which of her partners she would use condoms with;

**Extract 6.14**

LH: are yo:u generally using condoms at the moment or	1
Julie: yeah I'd say um (.) nine out of ten time [LH: mhm] cause there's only (.) certain	2
people (.) um (.) the guy that I've been seeing for nearly two years (.) and we don't use	3
condoms [LH: mhm] but (.) the other partners that I have (.) we definitely do	4
LH: m (.) and do you (.) um (.) was that a kind of (.) negotiated thing where you got tested	5
and things or was it you just sort of (.) stopped using (.) condoms	6

Julie: um (.long) it was quite a long w- time after (.) um (.) it was discussed between us 7  
there was no testing (.) I'm seeing somebody at the moment (.) um (.) and we've both been 8  
tested (.) recently [LH: m] and um (.) we're still using condoms but (.) I'm not sure how 9  
long we will [LH: m] we have (.) discussed not using them (.) but um (.) if I were not using 10  
condoms with him (.) then would go back to using condoms with the other one (.) 11  
LH: ok (.) [so it would be (.) only one person 12  
Julie: [would do only one at a time yeah (.) yeah 13  
LH: why was why was that 14  
Julie: um (.) because I feel I've got a responsibility (.) to (.) (\*) the other person [LH: mhm] 15  
um (.) health wise and um (.) I mean because I can't be sure where (.) this other guy's been 16  
[LH: m] because I know he doesn't just (.) see me [LH: mm] um (.) and I'd feel responsible 17  
for the guy (.) because the the one that I've been seeing for quite a while it's very very 18  
casual once every month six six weeks [LH: m (.) m] something like that and it's just 19  
purely for sex [LH: m] whereas this (.) other guy is more friendship [LH: m] this new one 20  
(.) so it's just a bit more (.) intimate [LH: m] than (.) the other 21  
(Interview, O, f, late 30s, bi. WB)

In our second interview Julie described having made this change, getting tested for chlamydia and gonorrhoea with her partner and stopping using condoms. Julie's explanation complicates dominant discourses of trust and condom use, partly because in her case there is no assumption of monogamy for either her or her partners. For example, in our second interview Julie discussed an experience of a foursome in which two men used condoms with the women who were not their regular partners. As Kippax and Race point out, the practice of negotiated safety can be contrasted to strategies which stress the importance of monogamy and assume HIV or STI negative status without testing (Kippax and Race, 2003, p.4).



The discourse of care in Julie's account is interestingly directed towards protecting her partner from possible risk posed by her less regular longer term partner. This points to a development in the construction of negotiated safety, in which responsibility and care is presented as an issue of intimacy. Getting sexual health tests in this context is positioned as symbolic of a shift in the relationship; combining more traditional modes of 'trust' as part of monogamy with an active negotiation of sexual practice. In this sense, Julie's position is quite different to the women interviewed in the case studies in Hirsch et al's (2009) comparative study<sup>5</sup>. For Julie, getting tested and managing condom use mark out her own subjectivity as 'safer' and categorise the relationship as more intimate, in contrast with the social risks of challenging extra-marital sex or requesting condom use faced by the women in Hirsch et al's ethnography. The ability to speak about risk here seems to enable a discussion for Julie about harm reduction that has been more commonly found in relation to gay men's practices such as those outlined in Kippax and Race's review (2003).

Dan also discussed a sexual health negotiation with his partner:

**Extract 6.15**

Dan: ((partername)) and I (.) we discussed it for a while and I (.) hadn't I mean I hadn't	1
said anyth- but he was like you know do you wanna (.) have sex without condoms (.) and	2
um oh yeah so I'd never had yeah so I was very safe with ((partername)) [LH: m] it's just	3
that he was the most magical person so there's no way I'm gonna let anything that I've done	4
in my recent past affect you so (.) [LH: m] but then in:: a:: february beginning of february	5
we both went to get tested (.) and I knew that I would be if I was fine then I would be	6
absolutely fine that was quite nice ((laugh)) quite a nice thing to do (.) for each other? I	7

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5 Their ethnographic research focused on rural Mexico, Nigeria, Vietnam, Uganda and Papua New Guinea (Hirsch et al., 2009)

don't know [LH: yeah] so we've been having unprotected sex (.) um (.) since then (.) but 8  
 um (.) yeah I mean I I've not had sex with anybody else think about having sex with other 9  
 people but then really am just doesn't really I don't feel the same way about it like I used to 10  
 (.) [LH: m] um and well I mean I c- you can never be sure can you but you know everyone 11  
 knows their own partner to an extent (.) 12  
 (Interview, L, m, mid 20s, gay, white)

Dan talked about the above negotiation occurring after his experiences of 'self-destructive' sex discussed in chapter five. Dan presents using condoms as a symbol of how he felt about his new partner – similarly to Julie's account above, protecting his partner is presented as a sign of intimacy. Negotiated safety is constructed therefore as a marker of a change in relationship status, in which getting tested for HIV or STIs is given as an example of something to do for someone (line 7). In Dan's narrative this is a way of protecting his new partner from his former, riskier self, and constructs his current sexual subjectivity as safer.

In some ways both of these accounts challenge dominant discourses found in previous research in which participants frame love and trust as prophylactics themselves (Holland et al., 1990, p.125). Negotiated safety rests on different assumptions about relationship and health status, and emerged from a community-based practice, initially among gay men after the increasing availability of HIV testing (Kippax and Race, 2003, p.4). Indeed, rather than 'trusting to love' (Rosenthal & Moore, 1993, cited in Rosenthal et al., 1998, p.36) I would argue that what is presented here is a discourse of *negotiating to trust*. In this discourse, sexual safety is something which is managed between partners, rather than necessarily assumed in relation to the length of the relationship or expectations of lifelong fidelity (Kippax and Race, 2003).

These data offer fresh insights into the shifting practice of negotiated safety. In addition to being a form of harm reduction as outlined in the existing literature, negotiated safety in these accounts *reworks* discourses of trust and intimacy in relation to condom use. Getting mutual sexual health screening thus incorporates a discourse of care, and when combined with discourses of trust and commitment, constructs the relationship as 'safer'. Both Dan and Julie give accounts in which the safety of their relationship is managed in relation to discussed risks. Dan's relationship is contrasted to his earlier, riskier subjectivity and unprotected encounters, and Julie compares her more recent partner to her less regular partner, and her lack of knowledge of his other sexual partners. It could be argued that both Dan and Julie inhabit positions that are characterised by dominant public health discourses of 'risk groups'; in terms of multiple partners, as discussed above, and sexuality. The fact that 'safety' is not discursively *assumed* perhaps makes space for discussion of the strategies in which 'trust' is negotiated. This appears in contrast to the common sense construction of particular relationship types as automatically 'safer' in the other accounts above, and in some existing work on sexual negotiations.

It is important to note that condom-less sex is still privileged in this discourse. Indeed, though mediated by sexual health testing and negotiations of safer sex rules with other partners, not using condoms takes the position of a symbolic move into a different category of relationship and ultimately produces similar discourses of trust (albeit negotiated trust) as a form of protection. As such, I would argue that negotiated safety appears here as a modified form of relationship transition (Conley and Rabinowitz, 2004), in which condom-less sex is associated with intimacy.

## ***Conclusion***

Participants using the risky subjects interpretative repertoire drew on and produced categories in a number of ways. Participants positioned themselves and others in relation to 'risk groups' which were often reflective of public health discourse about risks of HIV, STIs and pregnancy. In discussing the inclusion or exclusion of particular people from the category of 'risk', participants constructed particular sexual subjectivities as 'risky', relating to wider discourses of identity, categories of social difference and relationship structure. The borders of these categories were shifting, sometimes drawn around national boundaries and intersections of identity marked by historical struggles over meaning. Participants used categories to differentiate their own and others' behaviour as 'risky' or 'safe', with similar categories being mobilised in different ways depending on the context and purpose of the utterance, for example blaming or justifying particular behaviours.

The analysis above highlights that condoms can be seen to perform a constitutive role in the construction of sexualities (Vitellone, 2008) and relationships, along differentiated lines of class, 'race', gender and sexuality. I would argue that the risky subjects repertoire produces ideological effects as it works up social categories, which were often constructed by participants as factual, drawing on rhetorical strategies such as footing shifts to present them as true, external and common sense. As argued above, the naturalisation of social categories can have implications for the allocation of resources, discrimination against particular social groups and everyday experiences of sexual negotiations. Discussing the negotiation of condom use can also therefore be understood not simply as accounts of individual decisions to use condoms, but as a discursive negotiation of identities and power.

While categories are useful tools for making sense of the world, they necessarily simplify a messy and complex world. Marking particular groups as 'high risk' can result in such groups being characterised in moral discourse as 'dogs' or 'unclean'. The association of condom use with particular groups thus carries the possibility of constructing a sexual partner or oneself in that way. Conversely, if a partner is not considered 'unclean' then this poses a potential risk in the raising of sexual health or condom use. As Miles has pointed out, the association of risk with particular groups can construct those outside the group as 'safe' (1997). The process of categorisation I have outlined here is complex. The borders of the category 'risky subject' are unstable, highlighted by the amount of discursive work required by participants in managing talk about risk. Being categorised as 'risky' was a potentially risky topic for participants, who often spent more time talking about themselves in relation to other groups who were considered more at risk.

I have focused my analytical attention mainly on talk about biomedical 'risks' of HIV, STIs and unintended pregnancy. There is a danger that a focus on biomedical risk can obscure other forms of risk that individuals or groups may be negotiating at a particular time, such as social risks (Hirsch et al., 2009) the risk of a relationship ending or being recategorised in an unwanted way (Holland et al., 2004, p.44) and the risk of not experiencing pleasure. In the following chapter I will explore how participants discussed condom use in relation to their embodied and psychological experiences of sex.

## Chapter 7: The moment

As sex researchers and public health professionals record, chart and attempt to understand sexuality, the messiness, mundanities and contradictions of bodies, intimacy and desire can become lost in the drive to classify and map the epidemiology of sexual behaviour (Dean, 2009, p.11). Participants talking about their sexual experiences often described their bodily sensations and desires, discussing their pleasure, pain, discomfort, enjoyment and disappointment. Discourse analysis has been challenged for not offering adequate tools to explore the embodiment of experience (Bartky, 2003). However, I would argue that an analysis of the stories that participants tell about their desires and their bodies can shed light on the cultural meanings attached to the messiness of sex, and how participants make sense of the sensations they are talking about. Embodiment and desire do not exist in a cultural vacuum and the language of sexuality is arguably part of how desire is constituted. Participants' accounts of their sexual experiences can be understood as socially produced, drawing on culturally available narratives and negotiating shifting norms of gender and sexuality.

In this chapter, I will explore the way that participants discussed condom use as a disruption to 'the moment' of sex. By analysing stories about 'the moment', it is possible to explore the common sense construction of 'what sex is' or 'what sex should be' in a particular social and cultural context. Research on sexual negotiations has consistently found that there is a dominant view that condoms can interrupt the 'flow' of sex (Gavey and McPhillips, 1999, p.363). The data collected for this study were no exception. Participants using 'the moment' repertoire explained and justified their experiences of using and not

using condoms in relation to the broad notion that condoms can 'ruin the moment'. This included describing condoms as inconvenient and difficult to use, uncomfortable or painful during and after sex, reducing sensitivity and pleasure and disrupting the 'mood' or 'flow' during sex. Researchers exploring this area over the past thirty years have identified discursive patterns in the normative construction of sex in which male (specifically phallic) pleasure is central, and intercourse is constructed as the 'main event' (Gavey et al., 2001; Hollway, 1989). Looking specifically at heterosex, Hollway termed this construction of normative sex 'the male sexual drive discourse' (1989).

Gavey and McPhillips have explored how this discourse of male pleasure relates to the normative construction of female sexuality as passive. Exploring discourses of 'the moment' requires an analysis of the gendered construction of agency in sexual negotiations. Heterosexual health promotion that focuses predominantly on the role of women in condom negotiation can sometimes result in a simplified understanding of both agency and desire in heterosexual negotiations, as women are expected to challenge norms of passivity and 'insist' on condom use, the assumption being that they are both able and willing to do so (Gavey et al., 2001; Gavey and McPhillips, 1999). Reflecting previous research, some participants constructed 'the moment' of sex as something that 'just happened' or that participants felt ambivalent about (see Muehlenhard, 2005; Gavey and McPhillips, 1999 for discussions on discourses of ambivalence and passivity in sexual negotiations). These accounts sometimes presented the sexual experiences as something the participant couldn't quite explain, relating to their body (or their partner's body) rather than their mind. This seemed to relate importantly to the notion that sex was something that should not be interrupted with distracting conversations or activities such as finding condoms.

Participants tended to position condoms in two ways in relation to 'the moment'. First, they were presented as a threat to linear, coital forms of sex, which was constructed as an unstoppable desire leading to vaginal or anal intercourse. Secondly, they were presented as a disruption to more non-linear, varied forms of sex as they were positioned as enforcing or privileging a separation between 'foreplay' and 'intercourse', in which intercourse (and consequently male orgasm) became the finale of sex. While these narratives about sex are quite different, they both similarly relied on the construction of the idealised 'moment' of sex as a time when the thinking, responsible mind should be absent. In addition, they both draw on a construction of sex as inhabiting a different kind of temporality to that of 'everyday' life: a 'moment' where time stretches, or speeds up, or flows in a particular kind of way. In this chapter, I will examine the construction of 'the moment', looking in particular at gendered discourses of desire, sexual performance and agency. I will explore this in relation to the discourses of sexual responsibility discussed in chapter five, looking at how a refusal of this responsibility was constructed by some participants as symbolic of embodied desire.

### ***Ruining the moment: the common sense of condoms***

I want to start by briefly looking at an example of how 'the moment' was mobilised in participants' talk. Ashley is a white working class heterosexual woman in her early 20s living in Oldham. At the time of our first interview she had a newborn baby. Ashley's pregnancy had not been planned, but rather had been the result of forgetting to take the contraceptive pill. After giving birth Ashley and her partner had to use condoms for a short time before she started taking the pill again:



### **Extract 7.1**

LH: yeah (.) how did you find (.) using (.) condoms (.) after that 1  
Ashley: I don't really like it [LH: yeah] to be honest (.) but (.) it just seems a lot seems a lot 2  
of hard work (.) like [LH: yeah] remembering to do it and [LH: yeah] I don't know (.) it 3  
really yeah you know like when you're in the heat of the moment you just forget don't ya 4  
[LH: yeah] (understand) why people do [LH: m] it's like one of those situations there it's 5  
like a mood killer in't it sort of go off and do something and then it's like [LH: m] ((both 6  
laugh)) I don't really wanna do it any more [LH: ((laughing)) yeah] 7  
(Interview, L, f, early 20s, het, White)

The account above reflects a common representation of sex and condoms throughout the data. Condoms were presented as an interruption to the mood or flow of sex while having to go searching for a condom or try to put it on (Flood, 2003; Braun, in press). The use of 'people' in Ashley's account (line 5) highlights this as a common sense construction of condoms. Indeed, many participants did not explain in detail what they meant by 'the moment' or 'mood'; the expectation being that there was a shared cultural understanding of 'the moment' that needed no further elaboration. When this was further discussed, participants using this repertoire talked about non use of condoms in relation to their own desires to have particular kinds of sex, including sex which felt more intimate, sex that did not conform to the coital imperative in which condom use signalled the end of foreplay, and sex which was uninterrupted.

Discourses of being 'swept away' were sometimes linked in the data to narratives of female passivity and inability to introduce condoms into a sexual encounter. However, there was also a great deal of ambivalence about condoms and discourses of gendered desire that complicate notions of passivity and agency in the construction of 'the moment'.

### ***Being swept away: desire and the moment***

As with previous research on condom use (for example Waldby et al., 1993; Gavey & McPhillips, 1999; Holland et al., 2004;), participants certainly talked about difficulties in negotiating condom use with partners, with both male and female participants giving accounts of partners trying to start intercourse without a condom without discussing it first. Participants gave varying accounts of how they dealt with these situations, often telling stories of stopping their partner, insisting on a condom being used or deciding to have non penetrative sexual activities. As Gavey et al (2001) have argued, the dominant discourse of female responsibility for reproductive and sexual health in heterosexual encounters can obscure or deny the possibility of female desire, as it is based on the notion that male desire is a stronger, less rational force in comparison with the more responsible, less desiring characteristics of normative feminine sexuality. This also crucially denies the possibility of female desire for intercourse, as it is based on the assumption that women should refuse intercourse unless a condom is used.

As I analysed my data, it did not seem to make sense to categorise particular individuals or groups as possessing either agency or passivity in particular situations. Participants gave accounts of different situations in which they were able to exercise varying degrees of control and power, and this even varied across accounts of a single encounter. Analyses of heterosexual negotiations have often explored the complexity and situated nature of passivity and agency in condom use. Holland et al (2004, pp.98–102) found hegemonic discourses of heterosex privileged male desire and embodiment, with their female participants often struggling to find a language of their own bodies and desires. Similarly, Gavey and McPhillips have explored discourses of heterosexual romance in which women

are constructed as passive, in contrast to men as active partners in sexual encounters. They argue that such discourses can be constitutive of sexual desires and identity, pointing to the potential disruption of heterosexual norms by active female sexuality (Gavey and McPhillips, 1999, p.365), but also importantly finding resistances to normative constructions of romantic sex. Research participants for this study had a wide range of experiences of using and negotiating with partners about condoms, with variation not only across participants but over time with individual participants and even with the same partners.

The following extract is taken from the second interview with Divya, a heterosexual woman in her mid 20s, living in London. In the extract below Divya talks about an encounter with a sexual partner. It was difficult to unravel how agency and passivity worked in Divya's accounts of her sexual experiences, as she talked about some experiences in which she felt she had some control, and others in which she had felt passive or ambivalent about the activities happening. She explained just before this that she had always used a condom with this particular partner, generally at his initiation. Divya explained that she hadn't tended to use condoms with other people, partly because she had never been pregnant or tested positive for HIV or an STI. The excerpt below is quite long but I think worth including to examine discourses of desire in detail.

### ***Extract 7.2***

Divya: this time I was on my period but I felt like I really did wanna (.) sleep with him (.)	1
in quite an aggressive way cause also I was quite drunk [LH: m] um (.) and (3.0) and I had	2
I had my tampon in (.) and I also just didn't wanna use a condom (.) um (.) because I just	3
wanted to kind of just you know (.) I just wanted to like <u>do</u> it (.) and but there was some	4
kind of um (.) awareness in my head of like what I was actually asking him to do (.) and I	5

think (.) what I was asking him to do was just kind of like trust me (.) in that moment [m] 6  
 or (.) um (.) I dunno it kind of felt like it was maybe some kind of test (.) like whether he 7  
 was gonna kind of give up his (.) like general principle (.) [m] in that moment (.) you know 8  
 in the situation with me (.) so I think that it's kind of like there's some link there between (.) 9  
 um (2.0) i- you know what hh (.) of like the kind of the physicality of it which was very 10  
 pressing (.) but also this underlying you know (.) a- link to some (.) some link to how he 11  
 felt about me [LH: m] that I'd attached to the (.) [LH: mhm] the condom use [LH: yeah] so 12  
 um (.) so we (2.0) I I think I was being quite forceful (.) and um I kind of let him know that 13  
 I was on my period and that I didn't and I just kind of wanted him to like fuck me (.) now 14  
 [LH: m] and he um (.) but he didn't he didn't he chose not to focus on the condom thing he 15  
 chose to focus on the tampon thing (.) [LH: m] and he kind of said (.) well (.) you know 16  
 you need to take your tampon out (.) and I was like (.) it kind of just like stopped me cause 17  
 I kind of wasn't expecting that that was gonna be the thing that he was gonna say and (.) so 18  
 anyway I was like (.) ok (.) so then by the time I'd taken it out ((laughing)) that was kind of 19  
 enough time for him to like put the condom on so I don't know whether that was just like a 20  
 sneaky trick that he did or whatever but of course like (.) you know maybe not because (.) 21  
 you know who shag someone with a tampon in it's a bit weird (.) so anyway um (.) so then 22  
 we did have sex with a condom on (.) and then in the morning I felt kind of (.) I felt quite 23  
 bad about it just cause I felt I put him in a kind of bit of a shitty position (.) um (.) and also 24  
 it wasn't being like (.) completely honest because even though I was drunk (.) and wanted 25  
 to do it there was this kind of awareness (.) in that moment that I wanted him to kind of 26  
 feel as (.) like (.) urgent [LH: m] as I (.) as I was feeling 27  
 LH: m so like th:e (.) not wanting to put a condom on is like (.) symbolic of the urgency 28  
 because if you ho- you feel so urgent that you haven't even got [time (.) to put a condom on 29  
 Divya: [yeah and there must be 30  
 some like (.) some (.) link however kind of tenuous that is about then how they feel about 31

you [LH: m] and how you know (.) what their kind of sexual impulse towards you [LH: 32  
 mhm] um (.) so it's like oh if you're kind of so measured about it if you always remember 33  
 (.) does that mean that you're never like you know just like completely caught up in the 34  
 moment 35

(Interview, L, f, mid 20s, het, Indian)

The sense of urgency Divya conveys here constructs a very embodied, desiring female sexual subjectivity. Her desire is described as physical (line 10), and her behaviour as aggressive (line 2) and forceful (line 13). These kind of terms are not often associated with older normative modes of female sexual subjectivity, in which passivity and virginity are central to femininity (Radner, 1999). The narrative reads almost like a reversal of the dominant heterosexual health promotion script in which female sexuality is constructed as responsible for enforcing condom use against an unstoppable masculine sexuality (Gavey et al., 2001). Holland et al (2004, p.98) found an absence of discussion about the body from the young women who took part in their study. They termed this 'disembodied femininity' in which their female participants negotiated and sometimes resisted gendered norms in which expressing physical desire was a threat to their reputation. Since Fine's (1988) influential work on 'the missing discourse of desire', many feminist scholars have engaged with theoretical frameworks and methodological approaches to explore the complexities involved in the expression of embodied, female sexual desire (McClelland and Fine, 2008). As I argued in chapter five and return to in chapter eight, while there are certainly some changes in dominant norms of femininity, there are also tensions and continuities with older modes of femininity in which sexuality and talk about the body remain associated with secrecy and shame.

It is important to point out of course that Divya is about a decade older than the

participants taking part in the WRAP study, for which the data were collected twenty years ago (Holland et al., 2004). However I would argue that there is a shifting discourse of desire in this extract that complicates the dominant narrative of condom negotiation found in some sexual health promotion and the focus of much research on heterosexual negotiations. It is important to point out that not all female participants expressed their desire in this way, indeed some expressed real difficulties in talking about sex. However, a close examination of this discussion of 'the moment' can shed light on changing discourses of sex and gendered desire.

Divya draws on the interpretative repertoire of 'the moment' here, constructing desiring (and desirable) sex as something which is driven predominantly by the *body* – with sexual impulses you get 'completely caught up in' (line 34). The role of the body could be seen to shift how time is understood in the moment – the urgency and flow of time is presented as produced by and representative of her partner's 'sexual impulse' (line 35). Divya's body is at the centre of the narrative, including overt references to menstruation and tampons (lines 1, 3, 16, 22). This is quite different from more passive constructions of feminine embodiment in which menstruation and the 'leakiness' of the female body have to be hidden (Schooler et al., 2005; Shildrick, 1997). Her partner's 'measured' (line 33) approach to sex and condom use is contrasted rhetorically with her urgency; she wanted sex *now* (line 14) without having to wait to take her tampon out or pause to find a condom. Interestingly, while Divya presents her desire as active, the language is still partly passive; she wanted *him* to fuck *her* (line 14). Condom use is not ultimately negotiated verbally in this narrative, but rather something that her partner instigates himself while she is taking her tampon out. In this sense, though her desire is presented as aggressive, her agency in terms of insisting on *not* using condoms is in conflict with her partner's ability to put a condom on during the encounter.

The possibility of *not* stopping to use condoms is constructed here as symbolic of an embodied desire – both her own desire, and her partner's desire for her. Stopping to use condoms therefore becomes about a *lack* or *deficiency* of desire on her partner's part. The common sense of sexual impulse is constructed as an unstoppable urge that leads towards intercourse – reinforcing the heteronormative discourse of the coital imperative (Braun, in press). While Divya's description of her own desires challenges the construction of female sexuality as passive, it also simultaneously reinforces the representation of normative masculinity as phallogentric. Condom use is presented in this moment as symbolic not only of physical desire, but of her partner's emotional connection to her; by not using condoms, her partner would signal that he trusts her, and feels strongly enough about her not to follow his usual principle of condom use (lines 7-8).

Divya's desire and sexual subjectivity is constituted in this moment as relational to her partner's desire. It is not just that she wants sex without a condom, she wants her partner to desire *her* enough not to use one. The condom therefore takes a central role in the construction of desiring femininity that is crucially related to being desirable, but is not *exclusively* about male desire.

This tension in discourses of female desire was evident in much of the data. For example, while in our first interview, Sian had described her condom use as fairly unproblematic, in her second interview she discussed some of the complexities involved in her sexual experiences over the diary-keeping period:

### **Extract 7.3**

Sian: I normally I do like normally systematically use condoms with all like with well all

1

partners cause I'm not using any other form of contraception [m] but yes recently there has  
 been a cer- like lax slipping there's like some of these like old men who ((laughing)) not  
 old men but men who are very resistant to it and who insist that there will be no penetrative  
 sex (.) if a condom is involved that will just be not on the table any more [LH: mm] so  
 anyway like obviously like bullshitting completely exaggerating and it would be f- they  
 would wear one it would be fine but I've given them all of these other options by saying ah  
 you know ah you can come in my mouth you can come on my face (.) so (.) then they don't  
 want to cause they want this whole like seamless [LH: m] um (.) pornographic narrative I  
 suppose (.) which is fine cause I do enjoy that [LH: m] but I like really like penetrative sex  
 and (.) even if they're just threatening (.) ((laugh)) even if they're bullshitting when they  
 say that they're gonna take it away (.) or it just went you know (.) I'm not very good at (.)  
 like (.) insisting under those circumstances

(Interview, L, f, late 20s, het, WB)

There is an interesting discursive reversal of the role of 'insisting' in condom negotiation in  
 Sian's account. As discussed above, the dominant construction of female sexual  
 responsibility places women in the role of 'insisting' on condom use. This is complicated in  
 Sian's account by her desire for penetrative sex. Interestingly, penetrative sex is presented  
 as something being *offered* by men to Sian; it is something 'on the table' (line 5) that men  
 can withdraw from her (line 12). The language in this extract sounds very much like a  
 negotiation or transaction in which offers or deals are made and an exchange takes place.  
 The expected flow of sex is presented here as a 'seamless pornographic narrative' (line 9)  
 which the partners are engaged in creating. Interestingly, this constructs normative sex as  
 simultaneously unstoppable and driven by desire, but also carefully plotted and  
 choreographed as though it were 'seamless'. There is a particular expected performance of  
 desire here as something that cannot be interrupted. Importantly, it is Sian's *desire* for



intercourse that she describes as preventing her from 'insisting' that condoms are used (line 13). She talks about her enjoyment (line 10) of the 'pornographic narrative' and penetrative sex, challenging the positioning of women as unproblematically able (and willing) to refuse to have intercourse without a condom (Gavey et al., 2001).

The coital imperative is both reinforced and challenged here. A number of participants, like Sian, talked about partners ejaculating on other parts of their body as a strategy to avoid using condoms. Sian later discusses this in relation to story lines and norms from pornography and her own and others' desires not to have intercourse as the assumed finale of sex. Condoms were presented by a number of participants as an obstacle to experiencing a variety of activities during sex because of having to take condoms off and use new ones for each moment of intercourse.

**'We mustn't': responsibility and desire**

Participants using 'the moment' repertoire presented condoms as a disruption to sex, whether as a disruption to an unstoppable linear sexual drive or non-linear sex. In both of these formulations, 'the moment' of sex was generally constructed as something that should be of the body, with condoms bringing a requirement to plan or think into an occasion that was meant to be about spontaneous pleasure and desire. For example, in our second interview, Elizabeth talked about her difficulties using condoms:

**Extract 7.4**

Elizabeth: ((laughing)) I'm <u>really</u> rubbish I've never been able to put them on anyone .hhh	1
um in a seductive manner ((both laugh)) that doesn't take away from the moment (.) um (.)	2
and I find them very uncomfortable (.) um (.) I seem to be quite dry down there (.) and	3

condoms (.) make that worse for me (.) um I dont know just the rubber or whatever it is (.) 4  
 and I just find it really (.) unromantic or unsexy [LH: m] and if you use other forms you 5  
 can just get on with it and you don't think about it and (.) yeah also I don't know also 6  
 makes me think that it's about (.) I don't know there's something to do with (.) 7  
 psychologically for me it's about stopping (.) stopping all the bad things about sex? Like 8  
 STIs or pregnancy and stuff and there's that physical thing in the room that reminds me? 9  
 [About] 10  
 LH: [m] 11  
 Elizabeth: all of the nastiness that can come from sex? [LH: m] as such (.) and I don't want 12  
 to be reminded of that cause that's not what it's about it's about enjoying yourself 13  
 (Interview, L, f, early 30s, het, WB)

In chapter five I argued that safer sexual subjectification involves the requirement to have the skills to use condoms, which was often presented in gendered terms as part of 'up for it' femininity. Elizabeth presents these skills as being able to put a condom on a partner seductively as part of sex, rather than something that interrupts sex (line 2). The introduction of condoms in Elizabeth's account not only interrupts 'getting on with it' (line 6) but *thinking* is discursively associated with risks, infection and nastiness, contrasted with the 'enjoyment' of non-thinking sex (lines 7-13). The association of condoms with 'nastiness' can be understood in the context of changing discourses of public health and the linking of condom use to 'risk groups' discussed in chapter six. The condom therefore takes up a complex position in relation to persistent norms of phallogentric, unstoppable sex and their tensions with public health messaging in which subjects are called upon to responsibly manage their fertility and sexual health.

The taking up of public health messages about risk in everyday talk discussed in chapter

six has implications not only for the construction of condoms as objects that represent risk and fear, but I would argue also impacts on the discursive construction of desire. The common sense positioning of condom use as 'responsible' was contrasted by some participants with the pleasures and fantasies related to 'irresponsible' sex, characterised as emerging from the body rather than the mind. Some participants using the 'moment' interpretative repertoire contrasted the 'naughtiness' of sex without condoms to the 'responsibilities' of using condoms. For example, Sam is a white bisexual participant in her late 30s in London. The extract below is taken from our second interview. Earlier in our interview she had talked about negotiating condom use as a constant struggle during most of the encounters she had while keeping her diary. She had found that it was generally up to her to suggest condoms to male partners and 'keep the pressure up' to use them. However, this was mixed with a sense of ambivalence that she had about condoms herself:

**Extract 7.5**

LH: and what other kinds of things w- you were saying you um (.) there we're some (.)	1
times that (.) the whole negotiation went out the window [Sam: yeah] because you were a	2
bit fucked or whatever did you write anything about that or can you remember how that	3
was or=	4
Sam: =um (.) yeah um (.) I think like just that sort of yeah feeling like (.) bit (.) guilty and	5
shit bout it like later and you know (.) sort of worried and stuff (.) as well (.) and also but	6
(.) and I sort of wrote other stuff about it's kind of like that um (.) sense of naughtiness of	7
not using them too (.) like when you're actually there doing it and stuff it's sort of [LH: as a	8
kind of <u>good</u> thing] yeah yeah ((laugh)) or it's a pull you know (.) I suppose sort of battle	9
with that [LH: m] °just going oh fuck it° you know [LH: m] and (.) that that's kind of	10
almost like (.) yeah (.) I suppose I don't know what else you'd call it really (.) but yeah that	11
that you sort of battle with that kind of like ahh ((laugh)) well go with the moment [LH: m]	12

kind of thing and that's kind of like you know sort of that bit of a turn on kind of thing	13
there anyway there for that .hh [LH: cause it's kind of like forbidden] yeah yeah that that's	14
it yeah (.)	15

(Interview, L, f, late 30s, bi, White)

Like many participants, Sam talked about feelings of 'guilt' (line 5) about not using condoms during sex. As I have argued earlier, condoms were constructed as tools of 'responsible' sexuality. Like the extracts above, Sam positions 'going with the moment' against the requirement to have to think about using condoms. There seem to be two things going on in this construction of thinking in relation to 'the moment'. Firstly, Sam presents not using condoms as a kind of resistance to the expected requirement to be responsible. 'Going oh fuck it' (line 10) contrasts against the careful, planning responsible safer sexual subjectivity of public health governmentality. This could also be understood in relation to the broader social construction of discourses of governmentality in which women are *expected* to be responsible as part of being successful feminine subjects of the neoliberal meritocracy (McRobbie, 2009; Koffman and Gill, forthcoming). Sam says this line more quietly, suggesting it is something they should not be doing. Her whisper is almost conspiratorial – positioned rhetorically in a similar way to suggesting another drink in the pub, another slice of cake; something that is against the rules of sensible behaviour in a particular context. Secondly, this refusal of doing 'the right thing' is constructed as erotic; a turn on *because* of its naughtiness (lines 7 and 13). This was presented in accounts of both linear and non-linear sex, in which the tension of expecting to introduce a condom was presented as erotic. For example, in our second interview Ben, a white bisexual man in his early 20s in London talked about this as a starting point for a shift away from using condoms with previous girlfriends:

### Extract 7.6

Ben: so when it comes to (.) sort of (.) the flow interaction during sex (.) of of putting in a 1  
condom if it's becoming this sort of like [LH: m] event then (.) I find that (.) it kind of fills 2  
you with this sort of (.) slightly rude desire to penetrate without a condom [LH: m] um 3  
when you're just sort of cu- cuddling and rolling around (.) there's like there's definite 4  
moments of like .hhh (.) o::o (.) I could (.) I shouldn't a::h [LH: m] and the- I've had that 5  
with every girlfriend until it's become (.) normal to do it without a condom [LH: m] or with 6  
some other form of contraception (.) but yeah there's the this kind of (.) va- it (.) if it if it's a 7  
sort of interruption of flow to do that it does then put in this kind of (.) slightly (.) rude 8  
desire to just (.) to get on I suppose with a bit of penetration [LH: m] um (.) I s- I dunno (.) 9  
I dunno how g- girls feel about (.) I s- it must be slightly the same because there's always 10  
the- there's a kind of moment of tension between the two of you (.) of ((stage whisper)) 11  
°we mustn't° [LH: ((laugh))] ah which I guess everyone must get 12

(Interview, L, m, mid 20s, bi, WB)

The construction of 'the moment' is slightly different to the more linear, unstoppable narrative of sex, such as that found in Divya's account above. Ben presents sex as an activity in which there is 'cuddling and rolling around' (line 4) which contrasts to the urgency of Divya's desire for her partner to 'fuck me now'. However, despite these differences, not using a condom is still positioned as symbolic of a particular kind of embodied desire, not just for penetration but to *break the rules* of safer sex. As with Sam's account, the moment of breaking the rules is highlighted with a whispered statement; 'we mustn't' (line 12). In both cases these utterances were almost tongue in cheek, but I think point to a certain kind of unspeakableness of 'unsafe' sex: both in terms of discourses of individual responsibility and in the context of an interview about condom use. Ben presents this understanding of the tension between responsibility and a desire to break the rules as a

commonly experienced phenomenon by generalising it not only to all his sexual partners (line 6) but to everyone (line 12).

The breaking of safer sex rules was often constructed by participants as something that was characterised both by eroticism and also by guilt, shame or regret:

**Extract 7.7**

Dan: you know sex without condoms it you know it's great and it's great cause it it just you 1  
know a it physically feels better and b it mentally make you just feel like great and then c 2  
there's always if you're doing it with people casually there's always like oo it's really 3  
naughty when you're really drunk and high oo it's really naughty when you're not when the 4  
next morning when you're not drunk and high like what the fuck like that was incredibly 5  
dangerous (.) how can I possibly get to that point (.) stop drinking (\*) and taking so many 6  
drugs (.) 7

(Interview, L, m, mid 20s, gay, white)

It is interesting that Dan describes not using condoms alongside being drunk and high. Much research about sexual health has looked at drugs and alcohol in relation to risky or protective behaviours during sex (see for example Lewis et al., 2009). Drugs and alcohol were often discussed by participants in relation to sexual experiences that did not fit the 'safer sex' model. I would argue that including a description of being drunk or high in these accounts is doing *more* than just reporting the participants general state of intoxication. Descriptions of taking alcohol and drugs can also be understood as rhetorically used by participants to justify and explain behaviour that could be perceived as risky or irresponsible. I would argue that being high or drunk serves as a shorthand for the absence of clear thought in a particular moment, and rhetorically makes the participant less

accountable for what is being said, or the actions that are being described. Indeed, Dan's clearer-thinking, sober self is presented in this short extract as reprimanding his riskier, non-thinking self (lines 5-7). In addition to this, discourses of intoxication could be understood to construct a particular kind of 'risk taking' subjectivity which could be understood in opposition to the construction of 'safer sexual subjectivity' discussed in chapters five and six.

The eroticisation of the moment in which a condom is or is not introduced can therefore be analysed in the context of the ideology of personal care and responsibility discussed in chapter five. For example, Divya discussed her own positioning as a responsible safer subject when she used condoms:

**Extract 7.8**

Divya: it feels like quite grown up to use condoms also (.) [LH: m] seems like really	1
responsible thing to do (.) I am quite proud of myself (.) when they are used even though	2
it's an- more than likely got nothing to do with me (.) um (.)	3
LH: what does it feel like a different like- a different type of sex that you're having then	4
Divya: no no just I just kind of feel like a more responsible person afterwards [LH: ok] you	5
know this is kind of what responsible people do (.) that makes me feel good	6
LH: so does that mean that you feel like an irresponsible person if you don't or it just	7
doesn't really register [but when you do	8
Divya: [no no it does make me feel irresponsible (.) and maybe that's another	9
reason why then it feels (.) that I wanna do that (.) maybe I just don't wanna be responsible	10
(.) in that moment	11

(Interview, L, f, mid 20s, het, Indian)

Divya's account highlights the role of condom use in the construction of a form of safer sexual subjectivity and responsibility. Interestingly, this was presented by Divya as something that was done almost independently of her – she says 'when they are used' rather than for example 'when I use them', and describes condom use as something that is usually up to her partner (lines 2-3). The taking up of a 'responsible' subjectivity is something that Divya presents ambivalently. Being responsible is presented in conflict with the kind of subjectivity she wants to inhabit when she is having sex – as highlighted in the longer extract 7.2 above. Such responsibility also conflicts with the temporal construction of desiring, impulsive sex as a moment in which there is *simply no time* to think. I would argue that this discursive construction of embodied, desiring subjectivity is in tension with a construction of a thinking, responsible and consequently less desiring subjectivity. Desire and responsibility are therefore rhetorically used to construct each other in opposition.

The construction of condom use as responsible and mandatory could be seen to produce these alternative ways of desiring such as wanting to break the rules, be 'irresponsible' and 'go with the flow' of a sexual encounter, which were also marked out by discourses of alcohol and drug use. As argued above, the moment of condom negotiation was presented as symbolic of the level of desire in an encounter. In both Divya's account above, and Dan's account below, this negotiation constituted their own sexual subjectivities in relation to the desire felt for them by their partner. As discussed earlier in chapters five and six, Dan talked in our second interview about having had unprotected anal intercourse a number of times during the diary-keeping period:

**Extract 7.9**

LH: and was that kind of was that your kind of decision not to use condoms in those	1
moments or do you think it was a kind of it was the people you were having sex with as	2



well 3

Dan: to be honest really sadly I think it was mostly me most of the time (.) like I think I I 4

get away with a lot because I'm (.) quite well here I'm very different and I mean I know 5

that I'm quite good-looking and I'm quite (.) socially able and I just you know you (.) I 6

dunno I just put I think I just enjoy pushing people and seeing how far (.) you can get them 7

to do what you want in lots of different ways in life (.) [LH: m] hopefully not you know it's 8

a good thing cause you sometimes you can see how people need to perform in a situation 9

for everyone to get the best out of the situation (.) and then sometimes you can just do it (.) 10

to meet your own ends to the detriment of your relationship with the person and the 11

situation and them (.) um (.) and it would almost be like if you wanna have sex with me 12

that's fine but we're gonna have sex without a condom or we're not gonna do it at all which 13

is pretty much what I s- not said but like indicated and then you can see people having to 14

make like a mental choice like do I turn down (.) this guy that looks a bit like ((celebrity)) 15

or do it and take the risk and then just feel bad about it and so I dunno like it was weird like 16

how (.) if you're sexually confident it gives you this power 17

(Interview, L, m, mid 20s, gay, white)

Dan's account is different from Divya's in two important ways. Firstly, he is talking about several sexual encounters and generalising about his experiences and motivations, rather than describing one particular encounter. Breaking the general rule of condom use is presented in both accounts as evidence of a level of desire felt by a partner for the participant. Not using condoms is presented as about immediate gratification for him – Dan later describes it as being about 'I want I want I want', but also importantly about his partner's desire. Persuading someone not to use condoms is used to signal Dan's agency in the encounter; with agency constructed as something that resides in the level of desire that his partner has for him. Dan's account is also quite different to Divya's in tone. While both

Divya and Dan express some regret about their experiences, Dan appears to present himself in a position of greater power in relation to his partners. I would argue that this key difference in the construction of agency relates to gender, in which Dan's position as a 'hegemonically masculine' (Connell, 2005) good-looking man is qualitatively different to Divya's position, notwithstanding her embodied, agentic language of desire.

In this extract and elsewhere in our interview Dan presented the pleasure of not using condoms as not only about the physical sensations involved, but as pleasure in the operation of *power* in a particular moment. Being able to get someone to break their own rules of safer sex positions Dan in this account as sexually confident, powerful (line 17) and good-looking (line 6). This positioning happens in relation to wider discourses of safer sexual responsibility; if someone is willing to take a risk in order to have sex with him, this proves his abilities to persuade and attract others and his own position as a desirable sexual subject. This is able to rhetorically work as a symbol of desire because condom use is positioned as the common sense behaviour for this encounter (it would mean something very different if this account was given before the AIDS crisis, for example). Indeed, this positioning of non-condom use as a symbol of desire arguably *requires* the construction of condom use as responsible.

Dan's account also does something different discursively to Divya's account in the context of public health messaging. As discussed in chapter five, Dan's account is given in the context of a rise of a subculture of 'barebacking' (Dean, 2009). Indeed, as outlined in chapter five, Dan conceptualised some of his own behaviour and the encounter with two men he narrowly avoided in these terms. Dean (2009) has argued that 'barebacking' as a subculture is a complex phenomenon, with multiple forms and rationale. Dean argues that the practice and subculture need to be understood in the context of shifting norms of

sexuality, including norms of masculinity and the formation of kinship among groups of gay men (2009, p.51). Dean's analysis highlights the importance of understanding norms and desires in relation to the context in which they are produced, which includes the context of public health messaging and the response to public health issues and crises from communities (2009, p.5). Discourses of desire, risk and responsibility could therefore be understood as mutually constituted as participants negotiate changing norms of sexual behaviour and identity.

### ***'Perform perform perform': phallogentric sex and masculine performance***

'The moment' was not just constructed as something about an embodied sense of desire, but also a requirement to perform a particular kind of gendered desire during sex, which condoms could disrupt or threaten. For example, Emma, a bisexual, white middle-class woman in her mid 20s in London discussed her sexual experiences with men during the diary keeping period. She had not had sex with men for two years before our interview, and talked about her surprise at feeling awkwardness and difficulties in negotiating condoms with new partners:

#### ***Extract 7.10***

Emma: something that I find hard to negotiate in heterosexual sex <u>is</u> that kind of like	1
pressure of the man he's under to like (.) have penetrative sex for kind of like (.) a good	2
amount of time (.) and to to be hard and like all these things where I just think god that's	3
just like (.) so anxiety producing for them and then for me I'm just sort of don't wanna	4
disrupt it almost [LH: mm] dyou know I don't wanna disrupt this sort of like (.) strange li-	5
his own little kind of thing that's going on there where he's put himself under a lot of	6

pressure and he feels the need to perform and (.) you know that for some reason makes me 7  
almost quite passive [LH: mm] because I don't want to sort of (.) do something that makes 8  
him feel like he can't perform and then he's sort of awkward and disappointed and I'm 9  
really disappointed probably as well and then it's just sort of lying there a bit like oh shall 10  
we just (.) °put *Friends* on or something° 11

(Interview, L, f, mid 20s, bi, White)

Emma presents the common sense, normative construction of heterosexual sex as phallocentric and coital. Feminist discursive analyses of the language of heterosex have explored dominant representations of 'good sex' or 'real sex' in terms of a focus on intercourse and the length of time that men are able to 'last' (Farvid and Braun, 2006; Harvey and Gill, 2012; McPhillips et al., 2001). Emma generalises this as a difficulty she experiences with 'heterosexual sex' in general (line 1). Emma talked about a number of sexual experiences with men, discussing how the context of each encounter changed the way that she felt able to interact and negotiate what she wanted. Emma explained that she found it easier to negotiate what she wanted with a male partner who seemed less sexually confident, but in each account there was a similar presentation of the fragility of masculine performance. In the account above, Emma presents her experience as almost a kind of curiosity that she is looking in on from outside (see Gavey and McPhillips, 1999 for a similar account in which a female participant described sex as though she were playing a role or looking on); the pressure is 'his own little kind of thing' (line 6) that she is disconnected from and perhaps finds slightly amusing. Emma draws on cultural references about failed or uninspiring sex lives; turning the television on (line 11) could be seen as symbolic of a disappointing night. In this context, she worries that sex will end if her partner is unable to maintain an erection for 'a good amount of time' (lines 2-3) as he will become embarrassed. The construction of the temporal importance of *particular* activities

presents 'the moment' as gendered. Similarly to Sian's account above, sex appears here as a kind of carefully crafted performance, which the introduction of condoms could bring crashing down. Interestingly, this heterosexual performance relies on the *female* partner to manage the encounter so that the male partner is able to fulfil his role. This gendered dynamic of labour in the sexual encounter could be understood as a form of *emotional labour* undertaken by the female partner (Duncombe & Marsden, 1993).

Farvid and Braun (2006, p.304) have explored how discourses of normative masculine heterosexuality in *Cosmopolitan* and *Cleo* construct the male ego as fragile and in need of reassurance from female partners. They argued that this shifts a focus in the sex advice of the magazines away from women's pleasure towards a concern about protecting male anxieties about performance. Interestingly, while Emma presents herself as 'passive' in this encounter (line 8), in her telling of the story her male partner's agency seems to be presented as almost passive in the face of social norms about sexual performance.

Questions of agency and passivity are tricky to unravel in these accounts. In the stories that Emma told about her sexual experiences during the diary keeping period, her perceived passivity did not mean that she had unprotected intercourse. However, Emma presented male partners' reluctance to use condoms as having other negative impacts on her sexual experience:

**Extract 7.11**

- LH: but it sounds like you were in all of those situations you did negotiate using condoms 1  
 (.) there wasn't a situation where you felt like that wasn't possible 2  
 Emma: no (.) I mean there was an experience where the guy didn't want to wear one (.) and 3  
 so we kind of agreed not to have penetrative sex (.) but that was kind of a bit of a horrible 4  
 experience really because then (.) that's kind of what I was there for and it just sort of he 5

was like he didn't want to and I was just like I think that that was (.) that we were quite 6  
 fucked and therefore (.) he was finding it quite hard I think to kind of (.) keep his erection 7  
 and (.) therefore use a condom (.) and so instead it was more like (.) I dunno he just kind of 8  
 wanted to like wank himself off on me (.) which I was kind of like (.) I had to phone my 9  
 friend the next day and I was like (.) that's so weird like I was so shocked and also (.) I'm 10  
 not sure if I'm really ok with that? And she was like oh yeah yeah I know I know he should 11  
 really ask you first and I was like but then if he asked me (.) I'd probably be really shocked 12  
 and I'd be like no 13  
 LH: so he didn't ask you 14  
 Emma: no (.) so that's kind of (.) bizarre and then he kind of fell asleep and I was just it felt 15  
 like a really wasted visit ((laughing slightly)) to be honest I was just like alright (.) I feel 16  
 like I got really nothing from this experience except from like come all over my chest 17  
 which is great [(\*) 18  
 LH: [so he so (.) you said not without a condom and so he just 19  
 Emma: well I kind of went to get one out because we were both naked and kissing 20  
 whatever and then he kind of was like mm I don't think that's gonna work (.) so then we 21  
 just kind of carried like I knew he wasn't then going to have sex with me because 22  
 obviously I wasn't gonna do that but then I just thought we would fool around a bit more (.) 23  
 but then he just like (.) wanked himself off onto my chest 24  
 LH: and then went to sleep 25  
 Emma: and then went to sleep (.) [LH: yeah] 26

In both of these accounts, Emma constructs herself as relatively passive in her encounters with male partners. As in the shorter extract 7.10 above, the possibility of loss of erection is presented as an obstacle to condom use. Unlike Sian's account, Emma did not suggest the possibility of her partner ejaculating on her instead of inside her, but rather it was

something done without her consent (lines 11-15). While Emma presents herself as unequivocal in her decision not to have intercourse without a condom (line 23), the resulting experience is presented as something she did not have much control over.

Emma's account highlights the social and collective construction of sexual norms. A number of participants talked about discussing their sexual experiences with friends or online communities in order to make sense of them and form an opinion about how they felt about the experience. In this story, her partner's behaviour is presented as fairly normal by her friend (line 11), while Emma's voice in the story is shocked and unhappy about the experience. Sexual norms are presented therefore as contested and continually under discussion and revision. Masculine heterosexuality is constructed in this account as concerned primarily with male (phallogentric) pleasure and insensitive to her own desires, falling asleep immediately after orgasm. At line 25 I repeat Emma's comment about her partner falling asleep made at line 15, finishing the sentence at the end of her story, in which we co-construct a cultural narrative of women left unsatisfied after male partners' ejaculation. While the narrative of the experience has moved slightly from a *coital* imperative, the pleasure and orgasm of the penis is still presented as the finale of sex. However, this is combined in this account with an expectation that she *should* have experienced pleasure, and that this was a surprising ending to the encounter. Indeed Emma later reports that her friend told her she should have made her desires more clear during the encounter, suggesting an expectation of reciprocity through negotiation and positioning of intimacy as something that should be engaged in for mutual benefit (Braun et al., 2003; Giddens, 1993; Henderson et al., 2007, p.136). This arguably highlights a construction of intimacy in which partners expect a reasonable amount of equality.

'The moment' is presented here as creating passivity; not in terms of wanting to be 'swept

away' with desire, but in terms of maintaining the gendered *performance* of a particular kind of sexual experience, in which masculine performance through erection is central. Participants drawing on 'the moment' presented condom use as a potential threat to this construction of normative gendered performance during sex.

This discussion of the role of condoms in the performance of sex was not limited to accounts of heterosexual sex. For example, Dan discussed his decision to stop using condoms with his partner, as noted in the previous chapter:

**Extract 7.12**

LH: was there other stuff about kind of (.) condoms and your decisions to use them or not	1
use them that you kind of (.) want to talk about or you kind of have reflected on	2
Dan: no it was a good decision we waited (.) you know we made we did everything really	3
well I think you know we planned that (.) really well and (.) um (.) I think it was (.) the	4
right time to do it um (.) cause I dunno for me like (.) um (.) I dunno condoms are ok but (.)	5
like ((partnename's)) penis is like a stick of rock like he gets excited you just poke him	6
and it's like superhard whereas mine is like sometimes a bit more kind of I think because I	7
live too much in my head and I don't just relax all the time [LH: m] plus I've drunk a lot	8
and taken some drugs in my life so I know that they kind of don't help with things like that	9
so sometimes with a condom it can be physically quite difficult (.) um (.) and then it	10
becomes like a problem like then you're all you're thinking about is this (.) and then you	11
don't need to be thinking about that actually to be relaxed [LH: m] um (.)	12
LH: so you- when you say all you're thinking about is this is it all you're thinking about is	13
not staying hard or	14
Dan: yeah exactly that just (.) perform perform perform perform (.)	15

(Interview, L, m, mid 20s, gay, white)



I have argued above that thinking was often constructed by participants in opposition to a more embodied 'relaxed' kind of sex (lines 8 and 12). Dan presents loss of erection as a potential risk posed by thinking during sex, which threatens his ability to perform (line 15). Performing, in this context, requires maintaining an erect penis. On the terms of safer sex, losing an erection can mean that a new condom needs to be used, and intercourse may have to pause. Participants talked about worries of losing their erection, and the reduced sensitivity of condom use contributing to this. Here, Dan presents not using condoms as a way to avoid concerns about his performance and being able to be a 'stick of rock' (line 6) like his current partner.

As outlined in the previous chapter, Dan presented stopping using condoms as a transitional stage in his relationship with his new partner – something that was negotiated between them and symbolised their intimacy. Waiting and planning to stop using condoms (line 3) is positioned as the correct way to have condom-less sex. This framing of negotiated safety could be understood to draw on the discourses of responsible and healthy sexuality outlined in the previous chapter and above. In Dan's account, negotiated safety is positioned as a strategy to enable the performance of a more relaxed, embodied sex, with less thinking required during the sex itself. This was also reflected in narratives about the use of hormonal contraception by female participants, in which planning and effort *outside* of the sexual experience was presented as necessary in order not to have to think or plan during sex. 'The moment' of sex could therefore be understood to be constructed as a separate sphere, in which fantasy, desire and the body are constructed in opposition to thinking, responsibility and the mind.

## ***'Disney sex': deconstructing 'the moment'***

'The moment' was both produced and resisted by participants in their talk about their sexual experiences. A number of participants critically engaged with dominant discourses of 'the moment', presenting some forms of normative sex as performances that they did not necessarily take part in or enjoy. Participants reflexively deconstructed what they saw as idealised narratives of scripts of sex and contrasted them to their own desires and experiences. For example, Ben talked about the representation of sex in two television programmes he had seen during the diary keeping period:

### ***Extract 7.13***

Ben: this woman and the guy sneaking off into the forest and then just kind of (.) basically 1  
yeah (.) just going oh and getting fucked and there not being any (.) there not being any 2  
kind of issue with foreplay and there not also also there's no time for condoms [LH: mm] 3  
so it has to happen in this rush and this sort of (.) rush of desire and then leads to this sort 4  
of Disney sex (.) or maybe this slightly rough sex (.) there was an episode of brothers and 5  
sisters where (.) one of the sisters like (.) fucks a temp in the in the office closet and again 6  
it has to happen in this rush of desire [LH: mm] and this desire for for penetration so that 7  
(.) and again there's no kind of thought about (.) the there's no conversation about I dunno 8  
or foreplay or condoms and there's no breaks [LH: mhm] there's just this br:s it has to 9  
happen this which maybe is partly for the convenience of TV but then maybe it's also 10  
partly that (.) that's how wo- female desire is (.) at least allowed to be portrayed [LH: mm] 11  
(Interview, L, m, mid 20s, bi, WB)

The first programme Ben was describing was a zombie programme, and the second an American drama. The narrative of normative sex that Ben gives here follows the script of the coital imperative. In this script, desire is presented as being so overwhelming that it is

expressed in an embodied rush towards penetration. By describing this narrative of heterosex as 'Disney sex' (line 5), Ben positions it as unrealistic - the stuff of movies and fantasy. As Bragg and Buckingham illustrate in their analysis of young people's discussions of sex in the media, taking up a position as 'media savvy' in relation to others (particularly those who are 'less savvy') constructs particular kinds of sexual identities during a research interview (Buckingham and Bragg, 2004, p.62). Ben was not the only participant to differentiate 'real sex' from the sex represented in media, which I discuss in more detail in chapter eight.

As I explored in chapter six in relation to Katie's account (extract 6.8), Ben positions himself as a savvy consumer of media, discussing the impact of media production on the images he consumes (line 10). Ben also presents himself as a critical viewer – the sex of the US soaps he describes is presented in opposition to the non-linear, 'rolling around' narrative of sex he described preferring, as outlined in extract 7.6 above. Ben presents the coital imperative of 'Disney sex' as a product of social norms, in which representations of female sexuality tend to focus on desire for intercourse. Elsewhere in our interview Ben talks about the lack of representations of cunnilingus in film and television, in contrast with how he sees intercourse represented. He also used the description of these media representations of sex to discuss what he saw as particular 'storylines' associated with sex and presents his own sexual experiences as different. Thus the extract constructs the coital imperative as a dominant 'common sense' narrative of heterosex, even while Ben is critical of it. As argued above, condoms pose a threat to the performance of this rushed expression of desire as they involve stopping the rush towards intercourse.

Similarly, Paola, a 20 year old white European heterosexual woman living in London talked about the normative performance of rushed desire as something which had changed

over the course of the two years of her relationship. In our second interview, Paola discussed finding it relatively straightforward to introduce condoms into sex with her current partner, describing looking for a condom and putting it on as a 'playful' moment during sex. They had started using condoms just before our interview as she was having a break from taking the contraceptive pill:

**Extract 7.14**

Paola: I find like with (.) my long term partner I don't have this sort of like (.) oh my god 1  
it's like the sexual moment that can't be possibly ruined like (.) often sex is much more 2  
kind of chilled in the sense that there's not all this rush to make it like (.) .hhh ((gasping 3  
slightly)) super intense and and like you know (.) a::h (.) perfect and and high yeah the 4  
intensity of it I suppose people consider it like perfect sexual encounter very intense very 5  
(.) powerful very forceful in a in a way and ah you just like get completely (.) carried away 6  
with it and (.) I dunno that that can be nice but like it's not necessarily that (.) you know I 7  
mean it's not that you ruin it if you stop for two seconds you know and ah and I definitely 8  
find it (.) the the you know me and my partner having sex like it's not really like that 9  
anymore just because I dunno it's kind of like it's different I think it's involving and and ah 10  
and interesting in other ways without having to be like every time oh my god can't you 11  
know gonna jump onto each other and like (.) you know tear our clothes off and all that 12  
[LH: mhm] (.) like I suppose that kind of often the (.) the idea that I mean it's still the idea I 13  
used to have when I started having sex (.) of what is a perfect sexual encounter which was 14  
you know (.) get totally carried away with it rather than just actually you know taking the 15  
time to (.) all the other nice things that you can do before and around penetration you know 16  
what I mean [LH: m] and uh (.) and actually yeah that's quite that's quite (.) yeah also like 17  
the shift away from just like (.) purely penetration to like (.) all of the sort of things that 18  
you know you you can do that are much more fun 19

(Interview, L, f, early 20s, het, White European)

As with several of the accounts above, Paola points to the common sense construction of desire as expressed through *rushing*. A number of participants presented condom use as a problem because of their potential to slow sex down, suggesting that the normative construction of sex, as with Ben's 'Disney' sex, is rushed. Thus the way that time appears in sex: as rushed, or considered, or slow, constructs the normative dimensions of 'the moment'. Paola presents 'chilled sex' in contrast to the rushing of 'the perfect sexual encounter' (line 14). In this construction, normative sex does not involve taking your time (line 14) and rushes immediately to intercourse as the main event (line 15-16). Paola described this normative script in quite a humorous way, describing herself saying 'oh my god' (line 1) and painting a picture of sex involving partners tearing each others' clothes off that is a familiar scene from many film and television representations of passionate sex. In doing so, Paola highlights this narrative of sex as a performance of an 'ideal' form of desire that she does not necessarily subscribe to. Getting 'carried away' is positioned here as specifically related to *penetration*, in contrast to other sexual activities. In our first interview, Paola had listed having to stop and interrupt sex as one of the reasons she didn't like to use condoms. This had shifted considerably by the time of our second interview, in which this interruption was presented as fairly unproblematic.

### ***Moments of dilemma: shifting ideologies***

The accounts above illustrate the complexity of the social construction of condom use. Even when participants were deconstructing or resisting phallogentric modes of desire as normative and critically examining how they appear in media representations, they were often simultaneously reproducing them as the common sense construction of idealised sex.

The narrative of condoms 'ruining the moment' circulated in participants' talk, sometimes as a naturalised, common sense understanding of sex, and also as a culturally specific norm related to gendered power relations.

The social meaning of condoms was therefore something that participants actively struggled with in their accounts. I have explored the sites of some of these struggles over chapters five to seven, examining in detail three systems of meaning participants used to make sense of their experiences of using condoms. While it has been useful to look at each repertoire in turn, they often appeared in the data together. In some cases participants would present conflicting views on condoms in their first and second interviews, during the course of one interview or even in a single answer to an open-ended survey question.

These dilemmas (Billig et al., 1988) revealed something of the contradictory construction of the 'common sense' of sex and condoms, and also of the performative role of talk about condoms in constructing particular forms of gendered subjectivity. Such moments of tension highlight the contrary and shifting operation of ideology in everyday talk about sex.

I want to conclude this chapter by looking briefly at how these repertoires worked together, before moving on in chapter eight to examine how participants engaged with media representations of sex and condoms. The following extract is a response given to the survey question 'describe how you feel about condoms (what do you like/ dislike about them)':

**Extract 7.15**

I am very comfortable with condoms. They are the choice of contraception that	1
my current boyfriend and I use ever since we got together. However, in my	2

previous relationships we rarely used condoms, using the pill or injection as 3  
 contraception instead. However, my current boyfriend had always used 4  
 condoms and preferred them and I had no objection (especially as I didn't like 5  
 the pill much). Condoms even feel more secure to me somehow, the idea of a 6  
 physical barrier there makes it more obvious if it has worked or not. And I 7  
 always felt unreliable in remembering to take the pill on time. Saying that I 8  
 have never put the condom on him, (I dont know how and wouldnt want to do it 9  
 wrong - so with other partners I would not insist on condoms) but I am very 10  
 comfortable buying them and experimenting with different sorts. The only 11  
 downside is the distraction that having to go put it on causes. Also sometimes I 12  
 think it would be nice to be really connected and not have the barrier between 13  
 us that the condom creates. (Survey, L, f, early 20s, het, WB) 14

In this extract, the interpretative repertoires of 'care of the sexual self' and 'the moment' are constructed in tension with each other. The account moves back and forth between competing views on condoms, almost as if the participant was having a debate with herself. This can be seen in particular where the participant shifts position with words such as 'however' (lines 2 and 4) and 'saying that' (line 10). It could be argued that as the question specifically asks for what participants like and dislike about condoms, participants are more likely to produce dilemmatic responses. However, such dilemmatic thinking about condoms was evident across the data, as participants gave complex and often messy accounts of their experiences using condoms.

Using condoms is presented in line 1 as a 'choice' made with her partner. This notion of 'choice' is complicated by her statement that she 'would not insist on condoms' (line 9) with other partners. The sexual agency of the successful neoliberal feminine subject is shown to

be difficult to achieve, requiring the acquisition of skill and confidence (line 8-9). The extract shares similarities with the construction of gendered agency in Divya's account in extract 7.2. The participant above is positioned as quite passive in relation to her partner's use of condoms; it is something she has 'no objection' (line 5) to, but did not specifically request herself. The normative expectation in this account however is that a female partner would be required to 'insist' (line 9) on condom use with an unwilling male partner. I would argue that this highlights the contradictory nature of an ideology of neoliberal 'choice' against an ideology of unstoppable masculine desire and the phallocentric construction of normative sex. Both are constructed as the common sense construction of sexual behaviour, but come into conflict with each other. This is complicated further by the shifting boundaries of normative femininity I have discussed above.

The tension between the ideologies of choice and phallocentric sex seem to be managed in this account by the possibility that skilful use of condoms need not interrupt sex or cause a 'distraction' (line 11). As with the accounts from interview participants analysed in more detail in chapters five and above, the participant positions being able to put a condom on a partner herself and her willingness to experiment with safer sex methods as part of a responsible 'up for it' feminine subjectivity. Following this with a statement that that she is 'very comfortable buying them and experimenting with different sorts' (lines 9-10) suggests that there is a discursive risk in presenting herself as *not* knowing how to put a condom on. As I argued in chapter five, this could be seen to signal a changing construction of neoliberal femininity in which sexual experience is acceptable, indeed *expected*, within carefully defined boundaries. Interestingly, the dilemma between the responsibility to care for the self and the disruption of sex is played out by the use of the same word – the 'barrier' that enables her to feel confident that she is protected simultaneously disrupts sex as an act in which participants are 'really' (line 12) connected (without the latex getting in



the way).

This tension in the construction of intelligible feminine subjectivity often caused dilemmas in female participants' talk, as noted above. The three interpretative repertoires were in tension with each other at these dilemmas; participants wrestled with ideas of unstoppable phallocentric sexuality, the expectation to be confident and skilful condom users, the call to manage their sexual health, the boundaries of categories of sexual risk and the heavy symbolism that condoms carried in terms of both individuals and relationships. It is at these moments of tension that the reproduction and maintenance of systems of ideology can be seen. However these moments of tension also highlight shifts in the normative construction of sex, such as changing gendered expectations of sexual knowledge and experience. As participants negotiate these contradictions, they also highlight moments of resistance to dominant power relations, even if these occur at the same time as reworked or continued forms of inequality.

## **Conclusion**

Participants drawing on 'the moment' interpretative repertoire positioned condoms as a disruption to embodied, desiring sex. Condoms were often associated in participants' talk with *thinking* and *responsibility*, in opposition to *fantasy* and *desire*. Condom use was mobilised in the construction of gendered narratives of desire. Dominant discourses of phallocentric, unstoppable male desire were widespread in the data. Even where participants differentiated their own desires and sexual practices from this gendered narrative, rushed sex with intercourse as its assumed endpoint remained firmly positioned as the normative mode of sexual expression. This constructed the temporal nature of the moment in particularly gendered ways. Some of the female participants in the study

articulated embodied accounts of their desires. As argued in chapter five, these accounts were sometimes in tension with more passive norms of femininity and secrecy around sex. Participants actively deconstructed gendered norms of desire, presenting sex as a sometimes knowing performance of expected roles. As discussed in chapter five, the potential to introduce condoms as part of this sexy performance carried its own risks as failure to perform could position the participant as sexually inexperienced. I have also argued that the construction of unprotected intercourse as erotic or 'naughty' can be understood in part in relation to the positioning of condom use in public health discourses of sexual responsibility. The thinking, carefully planning mind was positioned in contrast to the unthinking, 'swept away' embodiment of desire, consequently constructing condom use as symbolic of a lack of or reduction of desire.

I further argued that the interpretative repertoires outlined in chapters five to seven often appeared to contradict each other in participants' talk, highlighting the contested and changing nature of ideological discourses of condom use. The following chapter marks a shift from the detailed exploration of these interpretative repertoires to an exploration of how media texts were situated in participants' accounts, examining the role of media representations in safer sexual subjectification.

## Chapter 8: Media representations and safer sexual subjectification

From a social constructionist perspective, people draw on the cultural resources around them as they make sense of the world and their own experiences within it. This chapter marks a significant analytical shift in the thesis. In chapters five to seven I outlined my theoretical argument, grounded in the data from interviews and open-ended survey questions. In particular I have used and developed the concept of *sexual subjectification* (Gill, 2003) to capture a sense of how participants worked to actively construct their identities in talk. Chapters five to seven were concerned primarily with the first research question outlined at the start of this thesis:

- What are participants' experiences of using condoms?

The analysis in the previous chapters also touched briefly on the two further research questions below:

- How do participants make sense of media representations of sex and condoms?
- How do participants relate such representations about condoms to their own sexual experiences?

For example, I explored the positioning of *The Jeremy Kyle Show* in relation to class and gender in chapter six, and the exploration of 'Disney sex' in chapter seven. This chapter seeks to build on this analysis, examining the role of media texts in *safer sexual subjectification*.

Media representations of sex are a small part of a much broader cultural context in which language, meaning and the common sense of sex is produced in complex and often

contradictory ways (Buckingham and Bragg, 2004, p.63). For example, participants often talked about their friends as an important source of information about sex, both when they were first seeking out information and as a continued form of support in adulthood. However, it was clear that many participants also engaged with diverse forms of media, both with friends and alone, and often in quite critical ways.

Across the interviews and survey data, participants discussed how they used a range of media as a source of information and advice about sex. Participants discussed using books, websites, online communities, magazines, pornography, television and film among the range of media sources they had turned to over their lives for information. In this chapter I will explore the ways that participants made sense of three different types of media: teen magazines, online communities and pornography. I will examine how participants talked about these media in relation to their sexual experiences and identities, looking in particular at the ways that talk about condom use appeared in discourses of active, knowledgeable sexuality and how non condom use appeared in discourses of fantasy and desire. I will then develop the analysis of the role of media in sexual subjectification by exploring some of the pleasures and difficulties that two female participants faced in negotiating discourses of 'up for it' femininity (Gill, 2003). Finally, I will discursively analyse a case-study of *The Jeremy Kyle Show* to explore the relationship between mediated text and safer sexual subjectification by analysing the text itself. *The Jeremy Kyle Show* was selected for analysis as a case study that would enable the discursive analysis of a media text alongside more than one participants' discussion of the text. *The Jeremy Kyle Show* provides an indicative example of the media representation of discourses of safer sexual subjectification and the interpretative repertoires explored in the earlier sections of this thesis. The inclusion of media data in addition to empirical data from interviews and surveys enables an examination of how the interpretative repertoires found in the

participant data can be seen to circulate in media texts, and how such discourses are reproduced, reworked and resisted in participants' talk about their own sexual experiences.

### ***Negotiating media***

Participants talked about engaging with a range of different forms of media in accessing information about sex. Some participants were regular members of online communities, and some continued to use other methods to seek out information about sex including buying books, magazines and searching online. Media featured as one potential source among others including friends, GPs and specialist sexual health services:

#### ***Extract 8.1***

Well, I'm used to finding out about things online, so any questions I have just go there. Magazines are rubbish - for example, every cosmopolitan has an article on 'things your man wants' which are all terrible. Movies, tv shows - all unrealistic. I guess there are some good books out there with a more sensible explanation of the more complicated stuff - say, fetishes, polyamory, s+m - if i was getting into a more interesting lifestyle they are where i would start if i needed information.

(Survey, L. m, late 20s. 'straight with a sense of humour', WB)

#### ***Extract 8.2***

I think online or chatting to sisters and friends is my preferred option these days. If its to do with contraception:my GP

(Survey, L. f, early 40s. het, Welsh)

#### ***Extract 8.3***

I look up stuff online regularly, maybe once or twice asked a friend about something.

(Survey, L, m, early 20s, bi/gay, British)

**Extract 8.4**

'Given that I know a lot more about sex now, I tend to only consult online sources if there is something I particularly want to know or am worried about, so I would look on websites like PatientDoctor or similar.' (Survey, L, f, early 20s, bi, WB)

Others positioned looking for information about sex as something of the past, or more appropriate for younger people:

**Extract 8.5**

'Just know about it'

(Survey, O. f, no age, het, WB)

**Extract 8.6**

'I am a fully grown woman. I think I know all I need to know about sex.'

(Survey, L, f, late 30s, het, black Caribbean)

**Extract 8.7**

'I'd be worried if I needed to find anything out by 27!'

(Survey, L, m, late 20s, het, no ethnicity)

Seeking out information about sex was conceptualised by some participants as something of the past, a one-off activity or something that they did when they had a specific concern, for example about an STI risk. This focus on the information gathering aspect of media representations is likely to have been influenced by the framing of the questions in both the surveys and interviews in terms of where participants get *information* about sex. A number of participants talked about the role that media played in their understanding of sex, or

critically engaged in deconstructing media texts, as seen with Ben's account in chapter seven. Participants often presented themselves as already knowledgeable about sex, such as the responses in extracts 8.5-7 above. Some also presented themselves in relation to less knowledgeable 'others' such as younger people or people from different ethnic or class backgrounds. This positioning can be understood to play a role in the formation of a participant's sexual subjectivity as they take part in the research, working up their identity in describing their sexual history and knowledge (Buckingham and Bragg, 2004, p.62).

As outlined in chapter two, my work starts from the perspective that media representations have multiple possible readings, but that these readings are also constrained by the discursive and material possibilities of a particular moment. The analyses below do not attempt to produce generalisations about particular media forms, but rather approach participants' accounts from a rhetorical perspective to explore the ways that they make sense of particular representations of sex, and relate those representations to their own experiences and identities.

## ***Magazines***

One of the most commonly cited sources of information for female participants were magazines such as *Cosmopolitan*, *More* and *Just Seventeen*. One male participant also spoke about accessing information in magazines aimed at women, although magazines featured much more heavily in women's accounts of their media use. Participants' narratives of magazine consumption reflected findings in existing research on the role of magazine-based sex advice in young people's sex education (Ward et al., 2006; Boynton, 2009):

### **Extract 8.8**

Divya: yeah (.) um (.) a lot of the a lot of our information then I guess came from (.) like what we'd heard other other girls had done (.) or (.) from magazines because there were quite sexually explicit magazines I guess (.) um (.) and so we all (.) read those

LH: and what can you remember which ones

Divya: well *More* was the most sexually explicit (.) um (.) and then kind of *Bliss* and I don't know (.) all those ones

(Interview, L, f, mid 20s, het, Indian)

### **Extract 8.9**

Debbie: the only magazine I can really remember reading (.) is ah a magazine called *Just Seventeen* which was a girls magazine at the time (.) for teenage girls it's not in circulation anymore and there was a magazine called (.) *More* (.) which I think is now quite popular (.) it wasn't that popular then (.) and it used to have like the position of the week and stuff which I think it still does (.) and I think used to read that

(Interview, O, f, early 30s, bi, white)

These magazines were generally presented as useful sources of sex advice when growing up. As with McRobbie's (1991) findings on young women's use of magazines, participants told stories of reading magazines as groups and alone. In addition to features on beauty, relationships and embarrassing stories, participants talked about the value of the magazines in providing specific, technical advice about sexual techniques:

### **Extract 8.10**

Ben: there's also flicking through stuff like *Marie Claire* and *Cosmo* when you find (.) copies of those lying around (.) ah in waiting rooms or in (.) friend's houses (.) um (.) cause they actually go they actually went into quite a lot of detail (.) you know mechanical detail



about how to you know (.) what to do [m] and sex advice for girls (.) which guys just didn't get at all

(Interview, L, m, mid 20s, bi, WB)

**Extract 8.11**

I used to read J17, Bliss, Cosmo and similar to learn about sex techniques as a teenager.

(Survey, L, f, early 20s, het, WB)

**Extract 8.12**

I bought Sugar magazine from around age 12 which taught me most of what I knew about sex before I actually had it. I knew how to have safe sex, how to put on a condom and how to make sure I really wanted it

(Survey, L, f, mid 20s, het, white)

**Extract 8.13**

Copies of More, Just 17 and Mizz, all had their place, with a clear messages on what was called STDs and pregnancy.

(Survey, L, f, mid 30s, bi, WB)

The above responses from the survey present teenage magazines as sites where teenage girls (and boys) could learn the techniques of sexuality, including those of safer sex. In extract 8.12, safer sex is positioned immediately next to the idea that the reader of the magazine should only have sex if they 'really wanted it'. The terminology is important here as sex education discourse often focuses on biological notions of 'readiness' and being 'ready' for sex (Lamb and Peterson, 2012). Highlighting the importance of 'wanting' sex shifts this, and the discourse of safe sex, into the domain of actively desiring subjects, rather than the more passive discursive construction of women delaying sex from persistent

(usually male) partners until they are 'ready'. As with Julie's account above, in extract 5.12, choosing to practice safer sex is constructed as part of successful femininity as learnt from *Sugar*.

During these interviews I remembered my teenage self poring and laughing over 'position of the week' with friends at school. I had found the advice in the pages of *Just Seventeen* and *More* very useful as a teenager and remembered feeling a sense of power from having information about sex and passing this information on or discussing it with friends. As such, I was aware as I analysed the data that I identified with and was perhaps quite invested in hearing the agency that many of the female participants expressed in relation to reading teenage magazines and learning about their bodies and desires. As explored in the chapters above, in the terms of 'up for it' femininity, learning the techniques of sexuality is framed as part of claiming a liberated, fun and expert sexuality. I had to caution myself against taking an overly celebratory view of the potential of teenage magazines and look also for moments in which they were experienced as regulatory, disciplinary or irrelevant. It is important to note the exclusions of the subjectification of magazine sex advice. The agentic female sexuality of magazines, as with many dominant cultural representations of femininity, is overwhelmingly heterosexual, white, able-bodied and slim (Gill, 2009). Indeed, some participants pointed to the exclusions they noticed in mediated sex advice:

**Extract 8.14**

'girls magazines gave me most of my information when i was 13-15 or so - reading it now makes me scared as its quite biased and being bisexual was never mentioned as something 'normal'.'

(Survey, L, f, mid 20s, bi, WB)

While some participants spoke about their engagement with magazines as something in the past, others drew a parallel between the advice given in teen magazines and that of magazines aimed at more of an adult market, such as *Glamour*:

**Extract 8.15**

Magazines have been my main source of info about sex since I was about 12 and someone	1
sneaked a copy of More into school. I also picked things up from films about sex, kissing	2
and relationships.	3
[...]	4
My use of magazines as a primary source of information has now continued as an adult	5
with pieces in magazines like Glamour (such as how to spice up your love life etc.)	6
I have also googled for specific issues, usually more for problems like one partner being	7
unable to perform.	8
I'm proud to say I have several sex position books!	9
(Survey, L, f, late 20s, het, WB)	

The participant above presents teen and adult magazines and searching online as part of a range of strategies she uses to find information about sex. The pages of magazines and the results of Google searches are sites where she can learn the skills of 'up for it' femininity. One of the central tasks of this active, sexy subject of magazine sex advice is to 'spice up your love life', as the participant highlights above. Gill (2009), Farvid and Braun (2006) and Tyler (2004) have all pointed to the performance-based model of sex prevalent in magazines aimed at both men and women. Through these discourses of management, individuals are incited to become sexual entrepreneurs (Harvey and Gill, 2011), working tirelessly to improve their sex lives as projects of self-fulfilment. This discourse of performance can be seen in the extract above, in which an 'issue' that the participant might

search for help with online is 'one partner being unable to perform' (lines 7-8). The language here echos that of workplace monitoring and assessment, in which individuals are called upon to become enterprising subjects in a reconfiguration of labour as psychological project of self-development (Skeggs, 2004b).

As outlined in chapters two and five, this psychological project can be understood as a technique of governance in the context of changing structures of power in neoliberal capitalism (Miller and Rose, 2007). In the dominant discourse of neoliberal meritocracy, skills acquisition is positioned as part of becoming a successful citizen. This enables unemployment and poverty to be reconfigured as issues of individual responsibility and failure, obscuring the role of structural inequality (Skeggs, 2004b, p.78). It also frames employment and skills acquisition as part of an individual's identity, repackaging the relationship between an individual, their labour and their workplace as one of personal development, rather than, for example, the extraction of value (Skeggs, 2004b, p.78). The growing focus of the language and techniques of management in the intimate sphere can be understood as one way in which the ideology of neoliberal capitalism is reproduced in everyday life (Tyler, 2004).

The project of sexual self-development is presented in the extract above as something that subjects can take pride in (line 9). This statement shows a shift in notions of appropriate female sexuality. On the one hand, learning sexual positions is something that can be (and is perhaps expected to be) taken up pleasurably as part of an agentic female sexuality. However the fact that she has to *state* her pride in this way also points to the complexity of this position; it is not so commonplace as to go without remark, indeed it is as though she is defending her position in anticipation of criticism. Interestingly, some participants talked about the role of online shopping in facilitating the purchase of sex advice books without

the need to visit libraries or bookshops to buy them. As other scholars have pointed out, there have been significant shifts in the normalisation of women purchasing items from sex shops, the mainstreaming of shops such as *Ann Summers* and home sex-toy parties (Storr, 2003). However, accessing the resources required for 'spicing up your sex life' can still require careful negotiation of the norms of female sexual respectability.

As I highlighted in chapter five, 'respectable' female sexuality can be understood to sit on unstable ideological ground in the current social and cultural context in the UK. Discourses of sexual liberation and empowerment find themselves in tension with the persistence of a sexual double standard in which women who express sexual desire, have multiple sexual partners or deviate from narrowly defined sexual norms continue to face discrimination, particularly those from working class or minority ethnic backgrounds. The combination of discourses of self-development with public health discourses of self-protection as empowerment position skills acquisition as central to a successful relationship with a healthy self. As with the framing of employment as a question of individual responsibility, this can position sexual health problems as a matter of personal failure, irresponsibility or laziness, obscuring the complex relations of power and social context involved in sex.

## ***Pornography***

Participants talked about pornography in a number of different ways. Participants told stories about finding their parents' pornography videos, discovering discarded pornographic magazines and being introduced to pornography by friends, in addition to talking about watching or reading pornography more recently. Participants took a range of condemnatory, celebratory and ambivalent approaches to the representation of sex in pornography. For one female participant, the recent discovery that her boyfriend had been

watching pornography had upset her a great deal, while for other participants pornography was presented as a form of entertainment, a source of information or as a functional tool for arousal. How to understand the production, consumption and social construction of pornography from a feminist perspective is an issue that continues to cause conflict among activists and academics working in this area. Research that touches on the use of pornography often finds itself entangled in debates about the sexualisation of culture, discussed in chapter two (Attwood, 2006; Flood, 2009). Even when attempting to produce nuanced and complex analyses of data, the politically charged nature of the topic can mean that researchers become positioned by others in terms of polarised 'camps' that become caricatured as 'anti' or 'pro' pornography (Attwood et al. 2011). I situate my analysis within a perspective that does not assume that there are easily understood 'effects' of pornography on individuals, but that does maintain a critical view of the unequal gendered, classed and racialised power relations that form the context in which pornography is both produced and consumed.

I am focusing a small section of my analysis here on two participants' accounts of their engagements with pornography, in order to explore how pornography can be understood as a site of sexual subjectification. It is important to note here that varied forms of pornography such as softcore magazines, hardcore videos, queer online porn, free sites such as *youporn* and written erotica are all very different forms of media. Indeed, as with any media analysis, any attempt to collapse all forms of pornography into a monolithic genre obscures the differences in production, consumption and representational norms across different genres and titles. Consequently it seems worthwhile to emphasise that, as discussed in chapter two and above, the analysis here focuses specifically on participants' own accounts of their engagements with media, rather than attempting to produce

generalisations for example about 'all pornography'.

### **'I always clear the history': pornography and sexual subjectification**

A number of female participants gave accounts in which they talked about feeling ambivalent or guilty about watching pornography, while also talking about having found it useful or helpful in their lives. For some participants, their views about pornography were not static, but rather had changed over time. For example, Julie talked about watching both online and DVD pornography:

#### ***Extract 8.16***

- Julie: when I've looked before it's always been a bit (.) guilty sort of [LH: m] um (.) or and 1  
I was always clear the history on me laptop and things like that [LH: m] you know um (.) 2  
but (.) but no an- a guy that I've (.) um (.) was the very first guy I met off the ((website)) 3  
which is just over two years ago [LH: m] I still see him now and then (.) and last time 4  
((removed for anonymity)) he came round he brought me some porn DVDs to keep me a- 5  
amused (.) um (.) 6
- LH: so when dyou feel like that- cause you were saying that you felt guilty before [and 7  
used to clear 8
- Julie: [yeah 9
- LH: your history when do you think that changed and what changed it 10
- Julie: I suppose (.) um (.) it was when I split up with my ex (.) and I was going through a 11  
period of (.) recognising that I'd been depressed and things like that and (.) I'd had got 12  
treatment for it and (.) and I was (.) becoming more confident and about meself and it built 13  
with the confidence [m] um (.) and (.) instead of thinking about sex as like (.) cause I've 14  
always liked sex but I've always felt a bit guilty (.) because I'd had a lot of partners (.) [m] 15

whereas now (.) it's um (.) cause I've got confidence in meself and (.) it's no I actually like 16  
 sex (.) and (.) if I want to have different partners then it's nobody's business but me own 17  
 [LH: m] um (.) I'm not answerable to anybody apart from meself [LH: m] and (.) feel (.) 18  
 feeling like as- again it's the confidence that (.) I like sex and (.) I like watching porn [LH: 19  
 m] and experimenting [LH: m] 20  
 (Interview, O, f, late 30s, bi, WB)

I explored Julie's account of condom use as part of a narrative of self-care and increasing self-confidence in chapter five. The extract above is taken from our second interview, and as with her explanation of her condom use, formed part of a broader narrative about a growing sense of sexual self-confidence, including her membership of online swingers communities and ability to negotiate her desires with partners. Similarly to Extract 5.5, the extract above presents an account of an agentic, desiring female sexual subjectivity. Julie's description of her feelings of guilt (lines 1 and 15) can be seen to reflect a particular norm of female sexual subjectivity, in which enjoyment of sex and having multiple partners is shameful. Julie does not explicitly state why these feelings might arise, constructing guilt around watching pornography and having multiple partners as a commonly held social norm. Julie is positioning herself in opposition to this norm; indeed at lines 16-17, she is stating her position against what seems to be an external judgement on her behaviour, with 'no I actually like sex' appearing as a retort to the expectation that she should feel guilty.

Interestingly, Julie presents the change in her feelings of guilt not as a result of changing social norms, but rather as a result of an individualised development of confidence in herself (line 16). This is specifically related in Julie's account to a narrative of psychological self-transformation from experiencing depression, to being an autonomous,



confident woman. I would argue that the way that pornography is positioned in this narrative can be analysed in relation to the rise in neoliberal discourses of self-help and self-transformation discussed above. Julie presents her engagement in a reflexive project of self-creation as enabling her to enjoy her sexual desires. Her desires for sex, multiple partners and pornography are expressed in individualised terms; it is 'nobody's business' (line 17) and she is only answerable to herself (line 18). The ability to watch pornography for her own pleasure is therefore positioned as a matter of individual, gendered empowerment, arguably in a similar tone to the kinds of discourses of female empowerment found in advertising (Gill, 2008). In these discourses of active, 'up for it' femininity, feminist discourses of independence and equality meet neoliberal discourses of choice and individualism to construct empowerment as a matter for individuals to pursue as a psychological, rather than necessarily political, project (Gill, 2003; Evans et al., 2010).

A number of participants positioned their engagement with pornography in this way. This can be understood in the context of conflicting discourses surrounding pornography in the UK, in which it could be argued that there is a mainstreaming of pornographic representations at the same time as an increasingly moralising focus on sexual representations from the political right (Attwood et al., 2011). Julie's discussion of her use of pornography can be analysed as discursively constructing her sexual subjectivity as desiring in relation to this contested site of cultural meaning. I would argue that in orienting towards pornography in this way, Julie is taking up culturally available discourses of individual, psychological empowerment that are characteristic of 'up for it' femininity. From a discursive perspective, as she makes sense of her experiences, she reproduces this neoliberal ideology as a common sense understanding of sexuality.

## **'Porn is like a fantasy': non use of condoms in pornography**

Participants talking about the representation of condoms in pornography discussed their conspicuous absence, or their tendency to be used in films for anal rather than vaginal penetration. Some participants referred to having seen condoms in pornography, but this being a surprising exception rather than the rule:

### ***Extract 8.17***

Paola: (.) I think I saw some porn which a condom was used that struck me [(\*\*)

LH: [oh yeah

Paola: I can't remember (.) um where (.) ah (.) but I was positively surprised

(Interview, L, f, early 20s, het, white European)

### ***Extract 8.18***

Emma: if you're watching porn and you see a condom that's so rare you're like oh my god  
did you see that (.) a condom (.) that's crazy

(Interview, L, f, mid 20s, bi. white)

Some participants talked about the different conditions of production for pornography that have an impact on whether condoms are used by performers. Dan talked about having performed in two pornographic films in the UK in the last year in order to save some money. In both experiences condoms were used, which he presented as a result of regulations in the UK enforcing their use and prohibiting 'bareback porn'. The section I want to focus my analysis on here, however, is Dan's talk about his own preference for watching pornography without condoms:

### ***Extract 8.19***

Dan: most of the porn I have is (.) is is porn without condoms because I think that for me

1

porn is like a fantasy (.) um and it should be something like (.) you know people it's 2  
 escapism isn't it's like a film or a book and you wanna read or watch (.) something that you 3  
 (.) takes you out of you know it provides a release doesn't it essentially in some way [LH: 4  
 mhm] so I know that doesn't help me because (.) but it almost it's like (.) um (.) if I do that 5  
 then I'm not (.) doing other stuff if that makes sense like I think if I didn't have porn then I 6  
 would just live in my head so much with this ridiculous kind of (.) things that I would do 7  
 things that I would regret that I can alleviate but just having quite wrong porn you know 8  
 [m] you know there just (.) you don't have to think about it you turn it on (.) you wank you 9  
 turn it off (.) that's it you tidy your room and hang your washing up (.) 10  
 (Interview, L, m, mid 20s, gay, white)

In lines 1-4, Dan presents pornography as a form of *escape* or *release* that resonates with the interpretative repertoire of 'the moment' discussed in chapter seven, in which the mind having to think about using condoms was presented as an interruption to a more embodied, 'swept away' kind of sex. Similarly, in lines 7-9 Dan positions porn as something that enables him to escape his mind; as with 'the moment', condoms are presented as oppositional to fantasy. The *wrongness* of the pornography (line 8) in contrast is presented as the important factor for Dan to escape his mind, reflecting the discourses of the erotic construction of 'irresponsible' sex discussed in chapter seven. Not using condoms is constructed here as 'wrong' and consequently as fantasy.

As discussed in chapters five and six, in our second interview, Dan presented a narrative of transformation from engaging in unprotected intercourse to a construction of himself as a safer sexual subject who had negotiated safety with his current partner. The 'things I would regret' (line 8) therefore could be seen to include having unprotected intercourse, which he presents here as potentially avoidable if he can fantasise about it by watching porn,

although this is complicated by the statement that this 'doesn't help' him (line 5). This narrative of release is a familiar discourse about pornography in which the exploration of fantasy is presented as something very separate to reality (Barker and Smith, 2012). Pornography is therefore used rhetorically by Dan here to construct a form of *safer* sexual subjectivity in which he relegates (or at least aims to relegate) unsafe sexual practices to the realms of fantasy.

Perhaps most interestingly, however, is how this strong statement of fantasy is juxtaposed with the description of Dan's everyday experiences of watching pornography. Viewing pornography is presented as a mundane activity that occurs alongside household chores. Dan also described his relationship to sex in this way, presenting it as an everyday, quick necessity like eating or drinking. The tension between presenting fantasy as something that sweeps you away, and simultaneously as mundane as 'hanging your washing up' (line 10) suggests that there is some interesting rhetorical work being done in this account. I would argue that this constructs pornography as both something *essential* and something *unremarkable*; and in the context of the 'wrongness' discussed above, presents it as something quite separate from the participant's lived experience of sexuality. Fantasy, therefore, in this construction is about a *temporary* escape from reality and the mind, and therefore one which should not be interrupted by the use of real-world concerns like condoms.

It is important to point out that participants often talked critically about the non-use of condoms in pornography, as part of a broader narrative in which pornography was discussed as 'fake' or 'unrealistic' and not a 'reliable' source of information. This lack of realism was interestingly positioned as both a potential source of enjoyment, as in Dan's account above, or a source of frustration or of misleading representations of sex. These

accounts positioned the participants as savvy consumers of pornography and more creative and knowledgeable about sex than the pornography producers. In the context of the contested construction of pornography in the UK, these accounts also arguably position participants in opposition to discourses of the 'effects' of porn or sexual representations that might be interpreted as 'wrong', as they are presented as separate from their own sexual practices.

## **Online communities**

In addition to discussing accessing pornography online, many participants talked about the role the Internet plays in their ability to access information about sex. This included access to free information and advice on official websites run by the NHS, blogs, sex advice sites and forums. Many participants talked about their use of 'googling' to access specific information on health questions. As online technologies have developed to enable greater user-generated data, so too have the ways that sex advice is mediated. Social networking, forums and online communities enable individuals to interact and construct identities and communities in online spaces (Renold and Ringrose, 2011).

Jess, whose account of stopping using condoms was discussed in chapter five, talked during both interviews about being part of online communities and using them to access and give information about sex. Across our interviews, Jess talked about her enjoyment of sex, with her experiences and desires forming a central part of her identity. Jess described her involvement in a sex advice group in an online community:

### ***Extract 8.20***

LH: um and (.) would you (.) you were saying um (.) about having had books and things 1  
like that when you were younger do you look for information about sex now when you're 2

talking about trying all these different things and stuff 3  
 Jess: um I probably look on the internet now (.) um (.) just cause (.) I guess the information 4  
 is more up to date (.) and then you (.) don't have to rely on one person's (.) opinion on it (.) 5  
 or like (.) you can kind of find out (.) um (.) like all the different opinions that people have 6  
 (.) um (.) and different suggestions and things (.) like I'm on ((online community name)) 7  
 which is like a (.) blogging site or like a diary site and then there's like a community there 8  
 which is ((group name)) which I have on my like my friends list like my feed so I see 9  
 people like basically post questions (.) um (.) to that and other people like say (.) oh this is 10  
 what I did (.) they ask questions like my boyfriend's really tall and I'm really short (.) what's 11  
 the best position for us to have sex in (.) and she'll be like oh I'm really tall and my 12  
 boyfriend's really short this is what we did (.) um or they'll be like (.) oh I think I have a 13  
 condom stuck inside me or something what should I do (.) um people just give their own 14  
 advice (.) I read that quite a lot now 15  
 LH: so it's called ((group name)) [Jess: ((group name))] mm (.) and is it (.) do you find (.) 16  
 do you feel like the information on there is pretty good information (.) 17  
 Jess: yeah I would trust it because there's so many people there? That if someone like posts 18  
 or like answers one of the entries saying like oh no you should never use condoms they're 19  
 not safe everyone else will be like what are you talking about (.) um (.) kind of like the 20  
 hive mind mentality I guess [LH: m] like everyone's coming from their different 21  
 perspectives (.) you've got like (\*\*\*) because you could discount each other's (\*\*) [LH: 22  
 mm] 23

(Interview, L, f, mid 20s, het, WB)

During our interviews, Jess described experiences of both looking for information or  
 advice and giving advice to other members of the community herself. This included  
 searching for information and reading others' experiences of using the contraceptive

implant when she was deciding whether to get one inserted. Similarly to the claims to authenticity of pedagogic reality television (Wood and Skeggs, 2011, p.5), the sex advice available in the online community is rooted in stories of personal experience. Members of the community share their experiences and compare the experiences of others, weighing up advice depending on the source and the level of consensus on particular issues.

The model of sex advice constructed here is quite different to that of sex position books or magazine problem pages. As discussed in chapter two, mediated sex advice in recent years has given rise to celebrity 'sexperts', who are usually not trained as therapists but rather gain credibility through media exposure (Harvey and Gill, 2012, p.489; Boynton, 2009). In contrast, the 'expertise' of the online community could be seen as less top-down, developed through discussion, agreement and disagreement in the community forums. Each member of the community participates in this construction of expertise as they tell their own stories or weigh up different sources of information. In the extract above, Jess describes the common sense construction of condoms within the community as 'safe'. While Jess presents the community as a space where she can read a number of perspectives, there are certain norms which are constructed within the community through the 'hive mind' mentality. As with the descriptions of magazine sex advice, sex tips and advice about safer sex here appear side by side as part of a body of knowledge required and passed on by members. The online community arguably provides a new kind of network of friends, where even the most embarrassing questions can be asked as they can be done so anonymously.

Sexual self-development, in this context, requires the skills of the knowledge economy; searching, filtering and assessing information online. Participants who talked about searching for information online constructed themselves as knowledgeable sexual subjects,

googling to find out about STIs and check symptoms alongside looking up information about sexual techniques. In terms of Jess' online community, this participation in the giving and receiving of advice can be theorised as actively constituting the sexual self. Returning to Foucault, this process is not one of infinite possibilities of self-expression, but rather constrained by the models available in members' communities (Foucault, 2000a, p.291). The global nature of online communities trouble easy notions of cultural and social norms, as members negotiate practices of self from diverse geographical and social locations. In Jess' case, one way that she is able to access discourses of sexpertise is by giving advice about safer sex and contraception in her online community.

The sex advice available in the online community cannot of course be separated from the many other modes of sex advice that participants might be engaging with. For example, the participant in extract 8.15 engages with multiple forms of advice from more top-down modes of advice such as books and magazines to the process of filtering online information through Google searches. The flows of information here are complex and require further research to pick apart their relationships. Sex advice should be understood as multimodal as people build their knowledge from a variety of sources, compare and share that knowledge with stories of personal experience that complicate constructions of expertise. The sharing of experience is a key feature of online communication. As scholars of reality television have noted, such representations commodify 'real life' into consumable parts which not only represents but constructs that reality (Wood and Skeggs, 2011, p.8). Thus Jess' interactions with her sex tips community construct social meanings of condom use and her own sexual subjectivity.



## Feminist blogs

A further site of interest in exploring online sexual subjectification is feminist blogs. Sian talked about making sense of her own sexual experiences by reading feminist blogs. Both of the following extracts are taken from our second interview, during a conversation in which we were discussing how she was able to communicate what she did and did not like during sex. During both of our interviews Sian presented herself as someone who got a lot of pleasure from sex, though this was not without its complexities, such as her partner at the time of our second interview expressing his discomfort with some of her previous sexual experiences. Sian described her increasing ability to be able to communicate with partners about her desires as related to 'maturity', comparing her new, more active sexuality with a former, more passive way of communicating:

### *Extract 8.21*

Sian: I don't know if I used to go to bed thinking like (.) ((dramatic voice)) oh god I 1  
wonder what's gonna happen ((laugh)) I wonder what he'll do ((both laugh)) what will I do 2  
if he does this it wasn't quite like that but I was definitely aware that I would've been far 3  
more passive and the only thing I would have been able to say (.) was no (.) [LH: m] like 4  
don't do that (.) [LH: m] like no I don't want you do that (.) no like (.) I've read about that 5  
and it doesn't sound very nice or like you know cause I wasn't as experienced [LH: m] so 6  
(.) whereas like (.) now I can positively articulate what I do want [LH: m] which means 7  
that you know you can have good sex really (.) it just just took so long (.) 8  
(Interview, L, f, late 20s, het, WB)

Sexual experience, in this account, is constructed as empowering for Sian – she presents her sexual experiences as key in forming her subjectivity as active and able to articulate her desires. Sian's comments about what she sees as more 'passive' forms of

communication reflect dominant discourses of heterosexual negotiations. This is significant in safer sex promotion, particularly the positioning of condom negotiation in sex education programmes. As I have shown in the previous chapters, Gavey et al (2001) take a critical view of health promotion that emphasises assertiveness training for *women* in refusing sex unless a condom is used.

Sian constructs this more assertive form of communication as an important factor in having 'good sex'. The importance of *wanting* to have sex was discussed earlier in the chapter in relation to discourses in teenage magazines. 'Good sex' is central in discourses of 'up for it' femininity and sexual self-development. It is something that must be worked on to achieve. Sian conceptualises her attitude to sex as related to a number of factors, particularly her engagement with sex-positive feminism. Sian talked about the influence that her mother had as a feminist on her attitudes to sex, but constructed her own sexual subjectivity as different:

**Extract 8.22**

Sian: you know that's where I get it from (.) but then it gets filtered through what I think is 1  
like a (.) more (.) these are third generation stories right like you know like feminists talk 2  
about pioneer lives [LH: m] and (.) we're living like yeah I can read the golden notebook 3  
and I can think oh yeah sexuality is all really miserable and ((laugh)) but it's not my story 4  
you know I don't feel like that like I (.) um (.) I know that that's not (.) my experience and 5  
it doesn't need to be so I think connecting with other people (.) know what other people just 6  
are doing and writing about and think is important (.) has (.) and then also like you know 7  
then you're happy to say like this is my (.) thing this isn't my thing this is my story [LH: m] 8  
this is my experience (.) like a terrible er whatever we are generation Y ((both laughing)) 9  
so ((laugh)) and how everything has to be a story everything has to be a journey so when 10

you're watching reality TV it's so neoliberal I put everything into my self narrative um 11  
 ((both laugh)) but ok so that's you know you can tell that story about what I just said but (.) 12  
 um (.) I (.) feel like it's been very (.) liberatory for me to consume that kind of (.) media 13  
 and (.) listen in on those kind of things [LH: m] and it's different my experience is different 14  
 from what it would have been [LH: m] um obviously it would've been different in different 15  
 time and place but it would've been different if I wasn't reading the same sites [LH: m] or 16  
 like (.) talking to the same people who also read those things 17

(Interview, L, f, late 20s, het, WB)

As with Jess' account of engaging with online communities, Sian's account highlights the role of shared experience in the formation of sexual subjectivity. There was a tension throughout Sian's interview in which she reflected on the way that the narratives and confessions of blogs could be understood as 'neoliberal' (line 11) or 'navel gazing' but simultaneously found them 'liberatory' (line 13) in living and understanding her own experience. Sian specifically mentions the different ways that stories can be told and heard, both in terms of her own experiences online and how her story will be told by me. Sian was aware of the way that her words would be chopped and placed on the page in service of a broader argument, as I have done here. Her comments highlight the mediated nature of all sexual storytelling; the stories about sex shared and created online, the stories participants wrote in their diaries, told during interviews and the stories I tell here should all be understood as practices in self-formation.

Feminist blogs, in this account, make possible particular forms of female sexual subjectivity. Sian combines neoliberal discourses of self-empowerment and fulfilment with feminist discourses of sexual liberation to construct a picture of an autonomous, liberated feminist sexual subjectivity. Sian draws on discourses of generation to differentiate *her*

sexual liberation from the liberation struggles of earlier generations of feminists. This narrative appeared in the context of Sian talking fondly about her experiences growing up with a feminist mother, but highlighting the differences in her approach to sexuality from this earlier second wave of feminists. Her account references the history of feminist struggle; *The Golden Notebook* could be seen as taking up a rhetorical position as a past form of consciousness-raising in contrast to the more current stories of experiences Sian reads on blogs today. In particular, this difference is characterised as one of changing possibilities and pleasure; the stories of sexual struggle from the 1960s are marked out as 'miserable' (line 4) in contrast to her own experiences. This difference could be seen in the account as partly presenting political gains having been won by the feminist movement, in which earlier feminists struggled so that women do not have to experience the same sexual inequalities. However, I would also suggest that this rhetorical strategy draws on discourses within the feminist movement in which narratives of progress construct past versions of feminism as older, less nuanced and anachronistic (Hemmings, 2011).

The pursuit of sexual fulfilment here is configured as part of a wider political project of feminism, with online sex writing and advice cast as a way of creating communities and sharing experiences. Sex blogging is constructed then as a form of consciousness-raising (Wood, 2008) and central to Sian's negotiation of a feminist sexual subjectivity. This seemed particularly significant in relation to the unstable norms of femininity discussed throughout the thesis; with online sex writing adopting a position as a space where such norms, alternatives and potential sites of change could be negotiated. As Sian points out herself, such negotiations can be understood to naturalise neoliberal ideology through individualism and the telling of personal stories, while also paradoxically playing a role in the creation of collective meaning and communities.

## ***Negotiating gendered sexual subjectification***

It is important to note that these active forms of sexual subjectivity are not entirely straightforward. For example, as noted above, Sian talked in our second interview about difficulties her partner had talking about her own sexual history. The call to be an enterprising sexual subject was not felt by all participants to be liberating, but rather some described it as an impossible (and not wholly desirable) task. For example, Natalie is a working class, white, bisexual woman living in Oldham. Like many other participants, Natalie talked about enjoying watching pornography and searching out information about sex, including owning sex advice books. However, she also expressed a great deal of ambivalence about sex. The following extract is taken from our first interview:

### ***Extract 8.23***

- LH: ((laugh)) and do you like (.) do you read magazines and stuff now or books or go on the internet or 1
- Natalie: yeah (.) sometimes like spice up your sex life and things like that [LH: m] read them (.) they're alright and they're not alright if you can see what I mean [m] they've got their pros and they've got their cons 2
- LH: what are the pros and cons 3
- Natalie: some of the positions are absolutely ridiculous ((both laugh)) you wouldn't even be able to manage them you know what I mean (.) you know what I mean [LH: yeah] with everyday life it's like finding the time to do that position if you like it finding the right (.) balance [LH: m] you know what I mean 4
- LH: so you think (.) the (.) books sometimes they don't= 5
- Natalie: =over exaggerate 6
- LH: like how much time you've got sort of thing 7
- Natalie: yeah (.) I know it says like make time but when you've got a busy lifestyle (.) you 8

find it hard to <u>make</u> time [LH: yeah] like if it says on the stairs it's like you know	15
[[((laugh))]] you know what I mean on the furniture on the fridge-freezer it's like that (.) I	16
think what have we got we've got some (.) different positions like 52 different positions (.)	17
and then we've got (.) orgasm cards (.) and when you're reading them it's like (.) ye:ah	18
LH: what are the so what's the- I've <u>seen</u> position cards but I've never seen orgasm cards=	19
Natalie: it's how to (.) have an orgasm	20
LH: in loads of different ways	21
Natalie: yeah (.) 52 [LH: ((laughs))] and I read 'em I'm like that (.) whatever [LH:	22
((laugh))] whatever like how you gonna manage that one [(**)]	23
LH:	[what kinds of stuff do they have
in them	25
Natalie: I think I got to about 3 and I gave up because I was like (.) no really you're just	26
having a laugh (.) I was just laughing at them	27
LH: is it re- unrealistic stuff or	28
Natalie: no not really like you'd be there about (.) three hours you know what I mean it's	29
very sensual (.) in there in the zone thing like that I'm like yeah whatever [LH: ((short	30
laugh))] do you know what I mean it's like (.) who's gonna find three hours for that [LH:	31
mm] you know what I mean some people do but I guess (we'll book each other)=	32
LH: =((laughing)) we'll book in three hours (.) yeah (.) so is it so the books (.) will (.) tell	33
you stuff like book in some time like three hours and [LH: mm] yeah	34
Natalie: (**) and then we've got books (.) and different things on how to be (.) nice like	35
foreplay things like that [LH: mm] I just read them and laugh sometimes	36

(Interview, O, f, mid 20s. bi. WB)

The account above highlights the way that sex advice constitutes subjects through

discourses of self-help and sexual fulfilment. The books are intended to 'spice up your sex life', as discussed above, and incite readers to work on their sexual skills by learning positions and different ways to have orgasms. While the availability of this kind of information can be experienced as liberating, it can also be experienced as disciplinary in the new norms of 'up for it' femininity that it both addresses and discursively constructs. The labour of sexual self-fulfilment must be fit in around the rest of the requirements of everyday life, including, for Natalie, her labour in the workplace. Natalie's reference to 'finding the right balance' (lines 9-10) echoes the language of self-development and self-monitoring of the neoliberal workplace in which courses on time management exhort employees to work on their techniques of self governance (Gill, 2011a, p.236). This governance can be understood to stretch into intimate life, with *working* on one's sex life positioned as an urgent and crucial part of having a successful relationship (Harvey and Gill, 2012, p.491).

There are several interesting moments of resistance to this discourse of self-improvement in Natalie's account as she justifies her point that the sex positions books offer an unrealistic version of sex for everyday life. Natalie humorously resists the book's call to work on her sex life, positioning the book as expecting her to have sex on the fridge-freezer (line 16). This extreme case formulation (Pomerantz, 1986) does rhetorical work in making sex positions books appear ridiculous and unrealistic. Natalie reinforces this with her comment that she laughs at the books when she reads them (line 36). However despite this humorous undertone, Natalie clearly struggles in this extract with the expectations of 'up for it' femininity and the notion that she should be able (and want) to try out 52 different sex positions and 'make time' for sex. In the breezy address of much sex self help, there is often no space for the possibility that the reader or viewer might just be too exhausted from work, face difficulties in other areas of their life, grapple with inequalities

in their sexual relationships or simply not want to have lots of sex (Harvey and Gill, 2012, p.494). Rather, the requirement to work on sexual technique is cast as a *responsibility* of successful neoliberal subjectivity. These discourses of female sexual empowerment therefore have implications for the performance of Natalie's gendered subjectivity during both of our interviews. The extract below is taken from our second interview:

**Extract 8.24**

- |  |    |
|--|----|
| LH: so you feel like did you write stuff about this (.) or did you have you been thinking          | 1  |
| about it   | 2  |
| Natalie: just thinking about it cause I don't have (.) I'm not one for (.) if it happens it        | 3  |
| happens it's not (.) I must be really bad me I must need to go to a counsellor I think ((slight    | 4  |
| laugh))  | 5  |
| LH: what made you say that   | 6  |
| Natalie: ((slight laugh)) because I (.) it it's not that it doesn't interest me it's if I'm in the | 7  |
| mood but it bores me (.) I find sex boring (.) it's painful as well but it's boring (.)            | 8  |
| LH: painful as well  | 9  |
| Natalie: mm I sometimes find it painful (.) he goes sit on top and I'm like no it hurts wont       | 10 |
| bother [LH: m] I don't know why I must just be no- abnormal  | 11 |

Earlier in the interview Natalie referred to herself as a 'weird customer' when it came to sex, and this is reiterated in her self-description as 'abnormal' (line 11). Her ambivalence is pathologised in her account – a problem in need of intervention by a counsellor. The expectation here, as discussed above in relation to Katie's account of her difficulties using condoms, is that Natalie *should* like sex and *should* want to have sex and work on it regularly. While she is able to resist discourses of self-development to some degree in the first extract, it is clear that discourses of female sexual liberation bring with them



alternative forms of regulation and gendered intelligibility. Natalie could be seen to be participating in some ways in the performance of 'up for it' femininity; by buying the books and trying out different positions, but she recounts these experiences in the first extract ambivalently, and in the second as painful and boring (lines 8 and 10). Natalie's self-criticism could be seen to reflect a double layer of regulation in the discourses of 'up for it' femininity; it is not enough that she 'experiment' or work on her sexuality, she must be psychologically transformed so that such work is experienced as her inner desires and pleasure (Gill, 2009). Not to experience such pleasure in self-discipline therefore becomes framed as personal and pathological failure.

Natalie's account could also be read as requesting help – part of the reason she gives for disliking sex is that she finds it painful. I reflected in my field notes after interviewing her that I felt quite strongly that I wanted her to have 'good sex' (or at least sex that wasn't painful). I wished that I could have pointed her in the direction of advice or information about sex that would challenge some of these regulatory discourses, or at the very least could introduce her to lubricant. I wondered about my position as a feminist researcher and my own investments in notions of consciousness-raising and sexpertise. As I did so, I felt implicated in discourses of the centrality of sexual pleasure in the way that I constructed participants' stories of their sexual subjectification (McGeeney, 2011).

Discourses of 'up for it' sexuality and self-formation defy easy categorisation as 'liberating' or 'oppressive' and must be situated in the context of changing norms of femininity and neoliberal discourses of power through consumption (Goldman, 1992). The governance of female sexuality is not new, but as Gill (2003) has pointed out, subjectification shifts its address to women and girls as actively desiring subjects, required to *choose* to govern themselves in ways that can be pleasurable and liberating, but also painful and difficult.

Mediated sex advice is one site at which this subjectification takes place. In the final section I will analyse this process of subjectification in a media text which might not usually be associated with sex advice: the confessional daytime talk show.

### ***'Put something on the end of it': Jeremy Kyle and safer sexual subjectification***

*The Jeremy Kyle Show* was selected for detailed analysis as a case study. I selected the show on the basis of the selection criteria outlined in chapter four:

- More than one participant referred to the media text
- The text was drawn on in a discussion about the participants' own experiences (rather than just listed or mentioned in passing)
- Condoms were represented either through talk or visual representation in the text

As I noted there, I designed these criteria as a way of selecting a case study from a wide range of diverse media texts referred to by participants. I wanted to ensure that my analysis could explore the way that participants talked about media in relation to their own lives, which required a case study that participants talked about in detail. Two participants discussed *The Jeremy Kyle Show* during our interviews. Both participants related the show to their own experiences, and referred to the central position that condoms adopted in the narrative of the show:

#### ***Extract 8.25***

Natalie: it's like watching *Jeremy Kyle* this morning (.) you see all these people that have babies and then split up and it's like (.) why (.) just like he always says put something on

the end of it (.) that's what it's there for

(Interview, O, f, mid 20s, bi, WB)

The show was therefore selected on the basis that it would provide a case study that would enable the analysis of participants' own discussions alongside an analysis of the text itself. As outlined above, the show provides an indicative example of how the discourses explored throughout the earlier chapters of this thesis circulate and are taken up by or reworked by participants in their discussions of their own experiences.

*The Jeremy Kyle Show* is a popular daytime television talk show in the UK. It is broadcast on weekday mornings at 9.25am and has been on air since 2005. It is often repeated at other time slots during the day, and sometimes in the early hours of the morning. The regular topics of the show include issues such as drug addiction, family feuds and infidelity. The programme took over the ITV talk show slot after confessional talk show *Tricia*, and while it follows a similar format, takes a more aggressive approach in which Kyle confronts guests about their behaviour and instructs them to change (Davies, 2011). Audience members are invited to contact the show if they have particular problems that they want to sort out with family members, partners or friends. This invitation is posted up on the screen before and after each advertisement break.

The show's host, Jeremy Kyle, performs a kind of mediation between the guests, similar to the format of US talk show *The Jerry Springer Show*. Kyle has recently exported the show to the US, and in promotional interviews with journalists has presented his show as a unique format in the US' saturated talk show market. Kyle positions his show as a therapeutic and no-nonsense intervention in the lives of the show's guests and as an authentic and 'real' journey of individual transformation for participants and audience

(Schaults, 2011). In Jeremy Kyle's biographical account of his life and his experiences of the show, 'I'm Only Being Honest', he positions the show as providing a service to those who come on to it:

The simple truth is that I am asked to speak honestly to increasing numbers of this country's rank and file who come onto my show looking for the help they say they can't access anywhere else...But here's the good news: most individuals have it in them to turn their lives around, and equally, this country has all the talent it needs to shape a better future for itself. (Kyle, 2009).

In addition to Kyle presenting his own interventions on stage as part of this support, the show often refers to its 'aftercare', in which guests access support from psychotherapists, psychologists and sometimes services such as rehabilitation programmes (Schaults, 2011). As such, *The Jeremy Kyle Show* also borrows from the makeover genre with what Wood and Skeggs have termed a 'moral/ pedagogic agenda' (Wood and Skeggs, 2011). The show's format and content draws on neoliberal discourses of self-transformation and responsibility, particularly around the issues of childcare, health, contraception and employment. Kyle specifically talks about condom use and other forms of contraception a great deal on the show, with his catchphrase 'put something on the end of it' often used during confrontations about paternity, childcare responsibility and sexual health. These catchphrases are taken up across different media sites such as blogs and discussion forums. For example, *YouTube* is filled with videos in which clips from the show are cut to music, auto-tuned and created into hybrid texts.

The ideological discourses of the show link closely with policy discourses of personal responsibility and poverty currently circulating in the UK. As I outlined in chapter six, it is

a controversial show in the UK, sometimes referred to as a shorthand for class-based insults or to refer to a sense of 'broken Britain' and signify a particular caricature of an unemployed, white working class subjectivity (Davies, 2011). The relationship between popular media representations and policy is sharply highlighted by the fact that Kyle shared a platform with the UK Chancellor George Osborne at the Conservative Party Conference in 2010 at a meeting organised by *The Sun* newspaper titled 'Getting Britain Back To Work' (Davies, 2011; Hyde, 2010). *The Jeremy Kyle Show* could therefore be understood as a popular media text through which ideological discourses of neoliberal responsibility are produced; both in terms of the content of the show, and the way in which the discourses of show are taken up across media platforms and policy discourse at a time of increasing government focus on dismantling the institutions of the welfare state in the UK.

As discussed in chapter six, participants engaged ambivalently with *The Jeremy Kyle Show* during our interviews. On the one hand, participants distanced themselves both explicitly and implicitly in their talk from the show, characterising the show's guests as 'risky others' who were irresponsibly promiscuous, fertile and a drain on social resources. For example, Katie, whose account of working class women having children 'willy nilly' was discussed in chapter six, presented herself as an irregular and perhaps reluctant viewer of talk shows.

In the context of the controversial positioning of the show in the UK, such distancing work could be seen as producing a particular performance during the interview in which participants do not want to be seen to be the 'type of person' who watches *The Jeremy Kyle Show*. The show has culturally been associated in the UK with unemployment, in relation to its daytime transmission slot. As discussed in chapter six, at the time of our second interview Katie was unemployed, so her representation of her engagement with daytime

television could also be understood in the context of not wanting to appear to be long-term unemployed. Despite this rhetorical distancing, both participants drew on the show as a form of evidence when discussing working class female sexuality and fertility.

My analysis focuses on an episode of *The Jeremy Kyle Show* aired on 22<sup>nd</sup> November 2010. The episode, which focused on sexual health, was part of a special series of the show called *Morning Surgery* in which experts such as GPs and psychologists were invited on to answer questions around a particular theme, and cosmetic procedures were performed live on air. The episode involved segments on provision of contraception to under 16s, STIs, a sleep disorder and a 'dermaroller' cosmetic procedure. The show had a slightly different tone to the regular episodes, with much more time for discussion with invited medical professionals and no features involving confrontations between guests. Indeed, one segment of the show adopted a pedagogic address, similar to popular medical television programmes such as *Embarrassing Bodies* or *The Sex Education Show*, in which Dr Jonty Heaversedge answered video questions about sexual health. This format constructed the episode as an educational programme; questions like 'Can you get pregnant if you have sex during your period?' are common features in sex advice and sex education content. While *The Jeremy Kyle Show* is not commonly understood as an educational programme, I would argue that it can be understood as a form of mediated sex advice.

The extract below involves a group of guests taking sexual health tests on air. This feature is a twist on a regular feature of 'testing' on the show. This usually involves a guest being given a DNA test to check for paternity or a lie-detector test on the subject of infidelity. Both are carried out using a similar formula, in which the participants go backstage to take a test and the results are revealed from an envelope towards the end of the episode. The show often includes teaser clips of the 'reveal' of the results throughout the show. The

structure of this reveal is reminiscent of talent shows such as *The X Factor* in which participants wait on stage while the results are read out in front of a studio audience. During the sexual health episode of *Morning Surgery*, four participants are invited to take tests for chlamydia and gonorrhoea. At the start of the show we are introduced to the participants and they are asked by Kyle to explain why they think they might be at risk of having an STI. Two doctors ('Dr Gemma' and 'Dr Jonty') speak with the participants about their concerns. The guests also talk 'backstage' with the show's 'head of aftercare' psychotherapist Graham Stanier about what a positive result would mean. At the end of the show, Kyle reads the results out in front of the audience to the guests sitting on stage.

During these earlier segments Kyle is particularly confrontational with one of the female participants. Sammy, who is 19, tells Kyle that she has had unprotected sex with 200 men during her lifetime. The doctors talk about the risks of not using condoms and Sammy explains that she has been tested for STIs in the past and the tests had been negative. The three short extracts below are taken from the end of the show, when the results of the test are revealed:

**Extract 8.26**

JK: absolutely Will let's get those results please if we can my friend (.) shall I tell you	1
before I open this what I find the most shocking thing of all (3.0) I find it shocking that	2
four people are sat on my stage on the Jeremy Kyle show (.) and fifty percent (.) fifty	3
percent of you failed the test ((audience gasps))	4

(*The Jeremy Kyle Show*, 2010)

**Extract 8.27**

JK: Gemma we'll ask you to speak to Gavin in just a second Sammy (2.0) um (2.0) I don't	1
---	---

need to stand here and tell you what I think of a 19 year who sleeps with 200 men aim 2  
 higher sweetheart (.) that's true (.) [Gemma: mhm] your preliminary test was positive for 3  
 gonorrhoea (3.0) ((audience noise)) you have gonorrhoea (.) you cheated on your boyfriend 4  
 two weeks ago a boyfriend you've been with for two years but I have to say this and 5  
 Gemma and Jonty will back me up as with all STI tests it needs a second opinion to 6  
 confirm it Gemma over to you 7  
 (*The Jeremy Kyle Show*, 2010)

**Extract 8.28**

JK: and I don't mean to be harsh (.) but you're still smiling darlin you slept with 200 men it 1  
 was almost like you felt you were gonna get away [with it 2  
 Sammie: [I was 50-50 about it 3  
 JK: but you you brought this on yourself 4  
 Sammie: I know 5  
 JK: and how do you feel 6  
 Sammie: and now I know I can get it sorted 7  
 DrG: But this is an opportunity (.) I think this is a really important opportunity [for you 8  
 Sammie: [to be more 9  
 careful what I'm doing 10  
 DrG: yeah exactly (.) you know to use protection and also to make wise choices for 11  
 yourself and your health 12  
 JK: absolutely learn from this that you can't you know that eventually it will catch up with 13  
 you same with you Gavin (.) you were very honest with us (.) and and for everybody (.) 14  
 safe sex 15  
 DrJ: yeah I think it's really important to say that you know it's fantastic that you've actually 16  
 confronted this [JK: yeah] something you [said earlier Jeremy 17



DrG:	[yeah well done	18
DrJ:	you know you said a lot of us hide away (.) um even if we get symptoms we don't	19
	want to think that we might have an infection [(.) particularly men actually	20
JK:	[it's true	21
DrJ:	you know we <u>don't</u> go and get a check up so the fact that you've had a check up today	22
	is	23
	wonderful [JK: m] <u>but</u> (.) um you know this <u>needs</u> to then change your behaviour cause	24
	this that's what this is (.) it's just it's really not taking care of yourself cause it's not caring	25
	enough about yourselves and the potential consequences particularly you know for young	26
	people (.) the consequences of infertility (.) further down the line because of chlamydia and	27
	gonorrhoea that's a really significant consequence that you <u>need</u> to think about	28

*(The Jeremy Kyle Show, 2010)*

The extracts above reflect the discourses of individual responsibility and risk that are characteristic of the care of the sexual self and risky subjects interpretative repertoires outlined in chapters five and six. In extract 8.26, Kyle positions a positive test for chlamydia or gonorrhoea as a matter of 'failure'. In extract 8.27 and 8.28, this discourse is expanded to link particular behaviour (in this case multiple partners) with failure and a lack of aspiration. I would argue that the form this advice takes reflects a particular construction of sexual health as a site at which individuals are required to manage themselves as part of a project of self-fulfilment, and constructs working class femininity as 'risky'.

In extract 8.27, Kyle admonishes Sammy not just for her unprotected sex, but for the number of men she has had sex with, instructing her to 'aim higher sweetheart' (lines 2-3). Sammy's sexual behaviour is presented by Kyle here as a result of a lack of aspiration.

Unlike research participant Jess' account in chapter five (extract 5.2) of her status as a 'committed adult' as a marker of sexual safety, Sammy is presented here as transgressing boundaries of normative femininity, in terms of the number of partners she says she has had, her infidelity and in not skilfully using condoms. This is further highlighted by Kyle commenting that 'it was almost like you felt you were gonna get away with it' (Extract 8.28 lines 1-2). Here contracting an STI is constructed as a *punishment* for Sammy's number of sexual partners. There is no space in this construction for Sammy to have enjoyed her sexual experiences: they are given as evidence rather of her low ambition. I would argue that this reflects a persistent sexual double standard in which women are stigmatised for having multiple sexual partners. This highlights an impossibility of female sexuality similar to that seen in Katie's account in extract 5.8, in which the *expectation* to be sexually experienced conflicts with the need to manage shifting norms about how many partners can be considered 'appropriate' for respectable femininity.

Combined with the educational address of earlier segments of the show, the extracts above position sexual health as an area for work and personal development. While if left untreated chlamydia and gonorrhoea can cause serious complications, they are both treatable infections. Sammy hints at this point in her comment that she can 'get it sorted' (extract 8.28, line 7). She delivers this line almost deadpan, resisting the script of transformational narratives in which reality television participants are generally expected to gratefully accept the show's expert advice, and perhaps provide what Grindstaff has termed the 'money shot' in which participants deliver 'joy, sorrow, rage, or remorse expressed in visible, bodily terms' (Grindstaff, 2002). However, the transformation story for the show is not about Sammy being prescribed antibiotics. The programme's intended journey for Sammy is to learn to make 'wise choices' (line 11) for herself. These wise choices are constructed as central to caring for the self (line 25). Crucially, the way that

this is constructed is not just about being *careful* (the framing of much sexual health promotion), but about caring *about* yourself. What is interesting here is the way that responsibility and sexual health are mobilised in this representation of condom use. Sexual behaviour is presented as not just a matter of behaviour, but as something related to aspiration, self-worth and a carefully planned authentically chosen self.

This careful planning is reflected in Dr Jonty's comments about infertility (line 27). The reference to fertility hints at the relatively recent preoccupation within UK policy and cultural discourses on the narrow time window for 'responsible' reproductive choices, particularly for women. In exploring the classed dynamics of the focus on teenage mothers, Tyler (2011) has pointed to the role of social anxiety about the timing of fertility for women at a time of cultural obsession about the importance of paid work. She argues that the framing of young, working class mothers as 'inappropriate' is 'a system of a wider 'fertility anxiety' and class envy which haunts middle-class neo-liberal femininity' (2011, p.220), in which successful femininity is specifically tied to education, career aspiration and attainment. at the same time as a cultural valorisation of celebrity pregnant bodies and motherhood.

I would argue that these extracts bring into focus the particularly gendered nature of the construction of safer sexual subjectivity, which I have analysed in relation to participants' accounts throughout the thesis. The assumption, in the story told by Kyle, is that Sammy's non-use of condoms is a matter of choice for her. Indeed, there is no discussion on the show about the difficulties and complexity involved in the negotiation of condom use (see for example Gavey & McPhillips, 1999; Holland et al., 2004; Braun, in press) – it is simply a wise choice that should be made to protect the self. Not making this choice is constructed as an indication of a failed relationship to the self. Ideologically this functions in a similar

way to the positioning of unemployment as simply an issue of individual failure and irresponsibility, or global poverty as an issue in need of girlhood entrepreneurialism, as seen in the 'girl effect' campaign run by the Nike foundation (Koffman and Gill, forthcoming).

## **Conclusion**

In this chapter I have further developed the notion of safer sexual subjectification, in which individuals are called upon to govern their sexual behaviour as part of a neoliberal project of self-formation. I have shown how participants drew on media representations as shared cultural understandings about sex, in terms of accessing specific information, sharing personal experiences or being part of communities. As participants made sense of the media representations they engaged with, they positioned themselves in relation to dominant understandings of sex and condom use. Even where participants engaged critically with such texts, they were used as tools to work up versions of reality and construct their own sexual identities. Participants often talked about their interactions with media as contradictory; media representations of sex could be negotiated in liberating, disciplinary, empowering, mundane and painful ways. These were complex dynamics to engage with without simplifying mediated sex as *either* regulatory *or* empowering. Talk about media texts highlighted shifting discourses of gendered subjectivities, in particular as participants negotiated tensions between persistent norms of feminine sexual respectability and more recent modes of 'up for it' femininity.

I have shown that the subjectifying address of sex advice can be experienced as liberatory and pleasurable, both for consumers and consumer-producers of more participatory forms of media in which participants were positioned as both audience and expert. However such

advice can also operate exclusions, reinforcing existing relations of power, and arguably offers up a version of sexual empowerment that rests on the ability and duty of the individual to work on themselves. This can position individual, psychological transformation as a central task of neoliberal sexual subjectivity, including the requirement to acquire the skills necessary for sexual performance and sexual health. The requirements to 'spice up your love life' and 'insist on condom use' can both be understood as techniques of neoliberal governance in which self-development is reframed as something that should be experienced as pleasurable. In the discourse of safer sexual subjectivity, individuals are called upon to choose wisely to construct a responsible, healthy sexuality and consequently blamed if they become pregnant without planning or contract an STI or HIV.

The flows of information across media sites create messy and contradictory formulations of the common sense ideology of sex and condom use. Participants' accounts highlighted that this common sense was in flux but also limited by existing material and discursive constraints, such as the everyday difficulties in 'making time' for sex, classed discourses of respectability and the persistence of the sexual double standard. Central to the dominant construction of safer sex in all of the accounts of media representations above was the position of the freely choosing individual I have explored throughout the thesis. I would argue that the naturalisation of autonomous choice at the centre of safer sex discourse can deny complex relations of power, desire and inequality. This occurs within the context of increasing discourses of neoliberal individualism within both the public and private spheres, whose ideological effects include the ability of governments to justify cuts in public spending and the withdrawal of welfare by characterising sections of the population as 'irresponsible'. It is important to note that such common sense constructions of sexuality were not experienced as monolithic, but rather constantly struggled over in participants' accounts.

## Chapter 9: Conclusion

'family planning works not just because smaller families can be healthier and wealthier but because empowering women is the key to growing economies and healthy open societies - unlocking what I call the golden thread of development.'

David Cameron, speech to the DFID Family Planning Summit, London (2012)

When I began this doctoral research project, I had the view that the lack of condoms represented in sex scenes on television and in film were contributing to a normative 'script' of sex. I reflected on the idea that media representations form part of the cultural resources that people use to make sense of the world and wondered how people navigated the complicated world of sexual negotiations without 'blueprints' or scripts offered in the mainstream media. This sentiment was also expressed by many of the participants in the study, particularly as they pointed to how few representations of condoms they had encountered during the diary phase of the research. However, as I analysed the surveys, talked to participants and tried to understand the phenomenon of 'condom use' in their lives, the project transformed rather more into a study of neoliberal sexual subjectivities, and the negotiation of changing sexual norms.

In this chapter I will pull together some of the central themes and arguments from this thesis, reflecting on the methodological and theoretical contributions it has made to the understanding of sexual negotiations and drawing out their implications for different strands of social inquiry. Suggesting some of the limitations of the thesis, I will explore a

number of potential areas in which the work could be developed in the future, as part of ongoing conversations in feminist sociological, social psychological and cultural scholarship.

### ***A feminist eclectic approach***

This thesis has taken an exploratory, interpretative and intersectional (Crenshaw, 1991) approach to the study of sexuality, highlighting the complex and contradictory operation of ideology in the negotiation and representation of condom use. My analysis has explored the detail of how 'condom use' was socially constructed in the talk of a diverse group of participants in London and Oldham. I have combined fine-grained analysis of talk and text about condoms with insights from social theory (Billig, 1999, p.576), mapping the dynamic and fluid characteristics of ideology in everyday intimacies (Gill, 2011b). As such, the analysis has provided fresh insights on the topic of sexual negotiations, particularly in posing questions about the shifting nature of gendered sexual subjectivity. Borrowing from the 'data-driven' (Speer, 2005, p.195) perspective developed in conversation analysis, the arguments in the chapters above were rooted firmly in empirical data. While transcripts were necessarily cut and presented as part of a broader theoretical narrative, the detail of data took centre stage in the analysis and the conclusions drawn from it. This focus has enabled me to grapple with the contradictions and ambivalences of intimate life, as well as reflexively examine the data in the context of the research project and my own position as researcher.

My eclectic approach took at its centre a motivation to identify patterns in meaning whilst at the same time capturing the complexity and messiness of the data. Throughout chapters

five to eight I explored discursive patterns across both survey and interview data, highlighting the effectiveness of a discursive and ideological approach for the analysis of spoken and written qualitative data. These discursive analytical tools also proved invaluable for my case study media analysis of *The Jeremy Kyle Show* in chapter eight. My research highlights that a feminist discursive approach can attend to both the persistence of gendered inequality and the structures of power within which it operates, while not giving an over-determined account of how these complex webs of power work in practice. My analysis explored how participants negotiated agency in condom use, situating this in relation to the material constraints and cultural resources of their everyday lives.

In developing an eclectic, feminist approach to the critical study of discourse, this thesis has made a contribution to the wider tradition of discourse analysis, producing an empirically-informed account of some of the contradictory ideological discourses of condom use. In particular my analysis has brought a new approach to the theoretical discussion about how people categorise themselves and other people in relation to sexual health risk. I argued that participants constructed risk categories differently when talking about themselves or other people. The drawing of the boundaries of these categories positioned participants in particular ways, and so could be understood as a rhetorical strategy used by participants, rather than necessarily only a statement of 'risk assessment'. This rhetorical approach to talk about risk could be useful for the study of other issues relating to the discursive construction of risk, such as recreational drug use. My analysis will also be of interest to discursive scholars exploring the use of categorisation and particularisation more broadly.

My research builds on and feeds into debates within the discursive tradition about the



analytical merits of linking broader, sociological questions to a detailed and systematic approach to the analysis of texts (see for example Wetherell, 1998; Schegloff, 1998; Billig, 1999; Speer, 2005, p.125; Fairclough, 2010b, p.10). An analysis of the ideological nature of discourse interprets what the accounts mean not only in their immediate context, but also in terms of structural power relations more broadly. Schegloff has contended that by taking a specifically political approach, analysts run the risk of finding only what they already know (1997). I hope that my analysis has illustrated the usefulness of a discursive approach that seeks to 'incorporate insights from social theory and other social sciences, including macro social science, into the analysis of particulars.' (Billig, 1999, p.576), and that rigorous analysis of discursive data is compatible with a wider analysis of the construction of ideology. Indeed, I would argue that grounding an analysis of the contradictory themes of common sense in the detail of empirical data helps orient the researcher to what is *not* known, what is *surprising* and what is *messy* about inequality, but situates this in an analysis informed by existing social theory.

In addition to developing the use of feminist rhetorical analysis, this thesis has developed the use of private diaries in research about sexual experiences and audience negotiation of media. As I outlined in chapter four, private diaries provide a tool for participants to reflect on their experiences over a defined period of time and potentially offer a different way for participants to make sense of their experiences during a research project. I noted there that the form that diaries take and the way they are introduced to participants can have an impact on the kind of data collected. I showed that keeping a diary can raise questions of confidentiality and embarrassment for participants, both in terms of writing the diary in the first place (Elizabeth) or talking about it to a researcher (Sonia). As I have argued elsewhere (Harvey, 2011), the private diary can be seen as a useful tool for exploring

tensions and ambivalences in participants' experiences. For example, Sam's reflections explored in chapter seven emerged out of a discussion of her diary entries about her experiences during the research period.

### ***Ideological repertoires: neoliberal subjects and gendered responsibility***

The three interpretative repertoires I identified in the data highlighted the 'contrary aspects of common sense' (Billig, 1996, p.237) of condom use. To summarise, participants drawing on the care of the sexual self repertoire accounted for use and non-use of condoms in relation to narratives of authentic and planned self-formation. The 'risky subjects' repertoire worked with existing social categories such as 'race', class and gender in classifying particular subjects as 'risky' in terms of sexual health. Finally participants using 'the moment' repertoire described experiences of using and not using condoms in relation to the idea that condoms 'ruin the moment' of sex. Following Gill (2009), I used these repertoires as an analytical tool to map the multi-modal and shifting nature of discourses of condom use, make sense of the patterns of ideology in talk and text, and relate these to the wider social and political context. My analysis has highlighted that talk and representation of condoms can be understood in many circumstances as ideological. In positioning *certain* talk about condoms as ideological, I am drawing on the argument made in chapter three, following Eagleton (2007), that discourses can be understood to be *ideological* if their actions maintain or challenge systems of power and inequality. Here I want to synthesise the central ideological threads found in the data, and relate the analysis in chapters five to nine to broader theoretical concerns about the particular ideological fields in question.

Throughout my analysis, I have returned to the issue of how participants produced discourses of *neoliberal individualism* in relation to condom use. Condom use was often discursively positioned as a marker and technique of aspirational, autonomous subjectivity, in which the 'choice' to use or not use condoms was indicative of an individual's relationship to themselves. This can be understood as part of an ideological shift towards self-management as a form of neoliberal governance (Tyler, 2004; Miller and Rose, 2007; Gill, 2009). Public health discourses of disease and morality were combined in the data with the notion of planning and self-management as a requirement for responsible citizenship. Thus I found that social categories such as 'race', class, sexuality and gender were discursively entangled with notions of immorality, dirt and irresponsibility in ways that naturalised existing patterns of inequality and discrimination and created new and complex forms of 'othering'.

The argument I have put forward throughout this thesis is that individualised discourses of condom use can obscure the complex cultural and social relations that form the context of intimate negotiations. Thus a woman not using a condom becomes characterised as evidence of failed aspiration, as in the extract analysed from *The Jeremy Kyle Show* in chapter eight, or a lack of self-respect, as explored in Matt's account in chapter five. Conversely, the ability to negotiate condom use can be framed in this discourse as the result of an individual, psychological struggle and achievement, as outlined in Julie's account in chapter five.

My analysis revealed the particularly gendered nature of this way of making sense of condom use. Despite significant changes in some areas of gender inequality in the UK over the last twenty years, men and women were positioned in quite different ways in

participants' talk about condom use, reinforcing what other scholars have found in the discursive construction of the requirement for *women* to take on responsibility for contraception and sexual health (Gavey et al., 2001). My data indicate that in some cases, this construction of the ethics of self-care was presented as something that could be taken up in pleasurable ways by participants. For example, Julie's narrative of condom use I explored in chapter five was constructed not as a heavily-felt requirement in which she had to enforce condom use, but rather was framed as part of her enjoyment and confidence in her sexual desires. However, some participants struggled with or resisted the *expectation* to have the sexual skill and confidence to negotiate safer sex, discussed further below.

The framing of condom use in gendered terms has wider implications for understanding the operation of neoliberal ideology. As I outlined in chapters two and five, such discourses position issues such as teenage pregnancy and STIs as resulting from 'bad choices' and have implications for the allocation of resources both nationally and globally. I have argued in the chapters above that the rhetoric of neoliberal individualism replaces previous, more top-down discourses of social regulation in favour of self-governance. While my thesis has focused on participants' accounts and one piece of textual analysis, the gendered rhetoric of individual sexual responsibility is also clear in recent policy discourse on sexual health and family planning. For example, in July this year UK Prime Minister David Cameron addressed the Family Planning Summit in London with a speech in which he positioned female empowerment at the heart of global economic development:

We're not talking about some kind of Western imposed population control.  
forced abortion or sterilisation.

What we're saying today is quite the opposite.

We're not telling anyone what to do.

We're giving women and girls the power to decide for themselves (Cameron, 2012).

The feminist rhetorical approach and analysis outlined in this thesis can help make sense of how neoliberal ideology operates across a range of texts. Rhetorically, Cameron's speech displays the characteristics of postfeminist discourse, in the sense of referencing feminist and postcolonial critiques of the oppressive nature of population control (Davis, 2011, p.202; Deepak, 2011), while simultaneously repudiating their wider political message about the continuing impact of colonial history and inequalities of global capitalism (McRobbie, 2004; Koffman and Gill, forthcoming). Cameron's speech reverses any critique of capitalism and instead offers participation in the market as a key signifier of female emancipation, reworking gendered inequality and global poverty as questions of individual 'decisions' rather than systematic oppression.

This thesis has shown the *detail* of how ideological discourses of gendered responsibility are taken up and challenged in participants' talk and text about condom use. The construction of common sense ideology can be understood to be dialectical, in the sense that social and moral norms are taken up by public health discourse and the production of fields of knowledge and expertise about sex (Waldby, 2007, p.5), and then negotiated and reconfigured in everyday language, as highlighted in chapters five to nine. By exploring the rhetorical strategies used by participants, I have shown how ideology can be naturalised and constructed as truth in everyday talk. For example, in chapter six I illustrated how participants used strategies such as footing shifts (Goffman, 2001), positioning particular representations as 'facts' (Potter, 1996) and referring to external expertise, to produce what

Foucault has called 'effects of truth' (Foucault, 2000b, p.119).

Gavey and McPhillips contend that while participants' talk in interviews should be reflexively analysed in relation to the situational context and demands of taking part in a research project, 'a person's way of speaking in an interview are resources that are likely to be drawn on in other social situations, and are illustrative of how she or he is discursively positioned' (1999, p.356). For example, in the case of the 'risky subjects' repertoire, I would argue that my analysis not only highlighted the categories that participants used in relation to sexual health risk, but gives some idea of the meanings given to particular sexual practices and identities, as highlighted by Sian's account of her interaction with a sexual health nurse in chapter six. Similarly, the talk analysed from *The Jeremy Kyle Show* cannot be understood as an everyday interaction, yet the classed and gendered discourses of responsibility from the show were drawn on by participants as resources in making sense of norms of condom use.

### ***Safer sexual subjectification and mediated intimacy***

My analysis has shown that the ideological discourses that construct the social meaning of condom use are characterised by dilemma and contestation. I have argued that participants actively negotiated norms of gender and sexuality, both reinforcing and challenging dominant discourses of condom use identified in existing studies of sexual negotiations outlined in chapter two. For example, in chapter seven, Ben and Paola grappled with a dominant ideology of phallocentric, coital sex, both reinforcing and challenging its position as a commonly held norm of 'great sex'.

As a way of exploring the complexity of these shifting ideologies, one of the central concepts I developed in this thesis was 'safer sexual subjectification'. This concept built on Gill's (2003) work on sexual subjectification, and Miller and Rose's (2007) analysis of governmentality to explore how talk about safer sex practices was mobilised by participants to construct themselves as 'safer sexual subjects'. I also drew on Vitellone's (2008, p.50) argument that 'safer sex stories' are a narrative technique of the self. I employed the term 'safer sexual subjectification' to signal the construction of condom use and other safer sex practices as symbolic of an agentic, planned and self-caring subjectivity. In doing so, I aimed to capture both the constructive and *regulatory* nature of safer sex stories, combining Vitellone's (2008) insights with the Foucauldian-influenced analyses of self-formation advanced by Gill (2003), and Miller and Rose (2007). In particular, I identified a new discourse of female sexual subjectivity, in which experience and knowledge about (safer) sex was an expectation that many female participants had to manage alongside persistent norms of sexual respectability. For example, in chapter five we saw how Katie struggled with presenting herself as a subject who was experienced, but not *too* experienced.

It is perhaps indicative of the wide reach of sexual health promotion and sex education (despite its inconsistent provision across the UK) that condom use was accorded such a maxim-like status in many participants' accounts. Even participants who were resistant to using condoms themselves, such as Simon (chapter six), or Divya (chapter seven), still oriented towards the notion that 'people should use condoms'. As I have reflected in the analysis in the chapters above, it is possible that a research project about condoms will be more likely to elicit particular kinds of views about condoms. However, as noted above, the interviews and survey data point to the discursive resources available to participants

(Gavey and McPhillips, 1999, p.356) and therefore tell us something interesting about how the ideological terrain around condom use is changing.

Possibly in response to the dominant notion that condoms 'ruin the moment', sexual health promotion organisations often suggest condom use can be incorporated as an ordinary or even pleasurable part of sexual practice. This was an approach that was spearheaded by LGB communities and campaigners, which can be understood in relation to moralising discourses surrounding HIV/AIDS that urged abstinence for all gay men (Kippax and Race, 2003). As the accounts in chapter eight highlight, participants recalled that this approach formed part of the discursive construction of sex and condom use in teen magazines. Discourses of pleasure have become more widespread in sexual health promotion, a move which has been particularly controversial in relation to sex education resources for young people. Indeed, social marketing for condoms seems to sit in an uneasy position between eroticising condom use and constructing sex as dangerous and risky.

One of the central conclusions of this thesis is that condom use can be used as a discursive marker of a new, agentic and self-caring subjectivity. In exploring the gendered dynamic of this shift, my arguments have built on Gill's (2003) notion of 'up for it' femininity, arguing that the skill to negotiate condom use (including putting one on a partner) was presented as an *expectation* for female participants. I began this doctoral research partly as a result of reading the accounts of young women in the WRAP study, in which 'the male in the head' dominated talk about heterosex (Holland et al., 2004). Consequently, at times it was extremely heartening to hear and read female participants' stories of successfully negotiating condom use, and in some cases positioning this as a relatively unproblematic



feature of their sexual experiences. It was clear that many of the women I spoke to were able to negotiate safer sex with partners, even in cases where this was conceptualised as having to 'insist' or 'fight'. In addition to marking out a new form of femininity, I showed in chapter six that the development of discourses of safer sexual subjectivity also seemed to have made possible new ways of signifying intimacy through condom use and 'negotiated safety'.

What also became clear was that many of the inequalities and problems that the WRAP participants faced were felt by participants in the current project, even if some of these were constructed in a different way, such as changing discourses of agency, discussed below. New discourses of sexual responsibility-as-sexual liberation can be seen to produce new techniques of governance, in which having difficulties negotiating condom use provoked expressions of guilt, regret and shame. My research contributes new participant data to an understanding of the gendered construction of safer sex, showing how these discourses are negotiated and sometimes resisted or reworked in participants' narratives about their own sexual experiences.

### ***Performing sexpertise: negotiating media***

My research also feeds into theoretical and empirical work on the relationship between media texts and sexual subjectivity. My data indicate that relatively recent notions of sexual 'expertise' are complicated by increasing access to the Internet. While the self-help industry is still undoubtedly a prolific and profitable enterprise, a number of participants questioned the utility of self-help books when so much information is readily available to be discovered online. As I explored in chapter eight, 'sexpertise' was presented as

something that could be gained both individually and collectively online, alongside more traditional notions of expertise. I argued there that the positioning of the expectation to develop fields of knowledge about sex can also be understood as a new form of regulation, in which self-development is framed as an essential component of neoliberal subjectivity.

The critically reflective techniques of 'the information society' were commonly discussed in both interviews and survey responses, with participants describing searching for or accessing information about sex across a range of media sites, deconstructing media representations and often taking a critical view of what they found. Buckingham and Bragg (2004, p.62) have highlighted that talk about one's own 'savviness' can be understood as part of an identity performance occasioned by the research interview. As Gill (2012) has argued, such expressions of savviness should not be taken as evidence that participants are somehow 'inoculated' against ideological discourses. Indeed, as Katie's account in chapter six shows, even if an individual is able to deconstruct media, such representations still form part of the cultural fabric in which we live our lives.

### ***Shifting discourses of desire***

Issues of desire, agency, subjectivity and empowerment have long caused dilemmas, discussion and sometimes outright conflict among feminists. These are issues that have surfaced in the UK most recently in relation to the debates about 'sexualisation' or 'pornification', discussed in chapter two. Some of the key questions at the centre of these tensions within feminism were highlighted in a recent (May 2012) debate in *Sex Roles*, in which feminist scholars discussed possible ways to make sense of discourses of female desire, agency and empowerment in the context of the rise in sexualised representations

and increasing commodification of sex. The discussion in *Sex Roles* could broadly be understood as stemming from Fine's influential (1988) paper, in which she posed provocative questions about the framing of young women's sexualities in terms of danger, risk and violence. She posited that, within policy and educational contexts:

The absence of a discourse of desire, combined with the lack of analysis of the language of victimization, may actually retard the development of sexual subjectivity and responsibility in students. Those most "at risk" of victimization through pregnancy, disease, violence, or harassment — all female students, low-income females in particular, and non-heterosexual males — are those most likely to be victimized by the absence of critical conversation in public schools. Public schools can no longer afford to maintain silence around a discourse of desire (Fine, 1988, pp.49–50).

Fine's article provoked both theoretical and empirical responses from feminists specifically seeking out accounts from young women and girls about their desires (see Tolman, 2012 for a summary of some of this work). The social context of research into sexuality has changed a great deal since this search for the missing discourse of desire. While as I have noted above, discourses of shame still permeate talk about sex, sex education has, in recent years, oriented much more towards notions of pleasure and desire (Philpott et al., 2006; McGeeney, 2011). As I argued in chapter one, this approach faces its own challenges, both in terms of political conservatism around young people and sexuality and for sex educators in developing an understanding of what talking about pleasure actually means in practice (McGeeney, 2011). These social and cultural changes in relation to the acceptability of female desire has meant that the focus of feminist theorising has also changed:

At present, instead of silence about girls' sexual desire, there is a virtual racket and, more importantly, there are pervasive images and representations of sexual-seeming girls that come at young people relentlessly (Tolman, 2012, p.746).

In this context, it seems that feminist analyses have shifted from the question of finding a (female) discourse of desire, to what feminist researchers should make of talk about desire from their female participants. While scholars writing in this field often critique the notion that there can be such a thing as an 'authentic' or 'true' desire that exists outside of culture (Lamb and Peterson, 2012; Gill, 2012), the debate in both academic and activist spheres nonetheless seems to 'stick' (Lamb and Peterson, 2012) on the point of whether someone who 'says' they 'feel' desire, agency, or empowerment, is 'really' feeling those things, and even if they are, what that might indicate in terms of gender equality and empowerment.

These discussions also form the context in which research, policy and health promotion about condom use are conducted. As I have discussed in the chapters above, condom use in heterosexual is often conceptualised in public health discourse and some research through the lens of female 'self-efficacy'. 'Self-efficacy' can be understood as a psychological concept which frames power and agency in individual terms (Bay-Cheng, 2012). This conceptualisation of gendered power as a product of the individual has taken place in an ideological context in which terms such as 'empowerment' have become incorporated into postfeminist, neoliberal discourse, where consumerism (Goldman, 1992) and self-development (Harvey and Gill, 2012) replace political consciousness and action as forms of 'empowerment' (Gill, 2008; Gavey, 2012).

My research contributes to this ongoing discussion, bringing new data and a feminist methodological approach that seeks to trace the operation of power in the everyday. I have highlighted how some of the female participants in this project expressed their desires, sometimes in very embodied terms. For example, in chapter seven I argued that Divya's account of a sexual experience was characterised by language that was quite different to more traditional, passive language of female sexuality. I posited that there were gendered differences in the construction of agency in sexual negotiations, pointing to the need for a social, rather than simply individual or psychological understanding of power in condom negotiation.

I noted in chapter seven that Divya's expression of desire used quite passive language that reinforced the dominant construction of coital, phallocentric sex as the common sense expression of desiring, embodied sex. In the context of the 'sticky' problems facing feminism outlined above, it would be possible for feminist scholars to draw quite different conclusions from these data. It could be used as evidence for both challenges to gender inequality, such as the accessibility of discourses of embodied desire; but also as evidence of reworked forms of sexism, in which female desire is understood in terms of *desirability*.

Importantly, in much sexual health promotion and research, 'self-efficacy' and 'empowerment' are equated with condom use. I showed that some female participants' desires *conflicted* with this equation, further highlighting the social construction of desire. I argued that the construction of the desire to 'break the rule' of safer sex could be understood as a form of resistance to neoliberal norms of (gendered) sexual health responsibility. Kippax and Race (2003, p.9) contend that a sociological understanding of

sexual health is necessary in conversation with more medical approaches in order to recognise the social and cultural *meanings* associated with sexual practice, which are not accounted for in the statistics of epidemiology. Indeed, these discourses of rule-breaking desire, as well as the new discourses of sexual health tests and intimacy discussed above, show how public health interacts in messy ways with existing social norms.

My research indicates that it does not seem to make sense to talk about sexual desire, or agency, in terms of a focus only on femininity. For example, in chapter seven I discussed the social construction of masculine performance, particularly the positioning of erection and ability to 'last' as dominant constructions of successful masculine sexuality. Sian and Emma's accounts in that chapter illustrated the force of this discourse in both social and relational terms. The very construction of participants' desires, and accounts of their experiences, can only be understood through thinking about how the individual, relational and social threads of sexual meaning are intertwined. In this sense, my data challenge individualised readings of power that are characteristic of models of 'self-efficacy' when it is divorced from other, more social conceptualisations of power (Bay-Cheng, 2012).

Returning to Kollontai, whose call to find 'the thread that will make it possible to undo the tightly rolled up tangle of sexual problems' (1972) I reflected on at the start of this thesis. I want to consider the importance of situating this search within a wider understanding of power and commitment to action. Kollontai further argued that problems of gender and sexual inequality required not only a change to individual relationships, but significant, structural changes to the way that we organise our economic and social life.

Consciousness-raising, sex education and the promotion of condom negotiation strategies *alone* are limited in addressing the complexities of inequality in the negotiation of condom

use outlined in this thesis. New forms of media certainly offer new ways for people to create and share knowledge, offering more diversity in sexual representation and new languages of desire. However, if such communities, knowledges and critical deconstructions of dominant norms are to avoid being more than 'coping' strategies (Bay-Cheng, 2012), they need to be connected to broader movements to understand and challenge the structure of gendered, classed and racialised inequalities (Gill, 2012) that form the context in which people's desires, experiences and meanings are formed and lived out.

### ***Future directions for research***

#### **Mediated flows of ideological discourse**

My findings point to the multimodal and dynamic ways that ideological discourses flow through media texts and participants' accounts. This argument could be developed empirically to explore how ideological discourses of sexuality are produced, consumed and reworked across a range of sites, such as reality television, *YouTube* and online communities. An online ethnography of web-based communities could explore the development of the 'hive mind' Jess referred to in chapter five, analysing how norms are negotiated, how 'expertise' is constructed collectively and individually and how this draws on or relates to more traditional 'top down' forms of expertise such as those found in self-help books, websites and television programmes. Similarly, in chapter eight I explored how the techniques of the information society could be understood as part of the technologies of self-governance. Future research could examine this process of self-development with participants, exploring the detail of how they negotiate their everyday internet use.

## **Sexual rhetoric in the political sphere: policy and activist discourse**

As I outlined earlier in the chapter, family planning and sexual health continues to be an area of both national and international political scrutiny. The analytical tools and theoretical arguments developed in this thesis could be developed further by exploring the discursive construction of condom use in the language of national and local government policy, linking this up to an understanding of how these discourses circulate on a global level through international development policy. A rhetorical analysis of these kinds of debates could map the shifting ideological field of sexual health and sex education in the UK, in particular drawing out the themes of classed, racialised and gendered discourse identified in this thesis and exploring their circulation in political rhetoric in more detail.

Activist groups and communities such as the 'Sex Workers Open University' ([sexworkeropenuniversity.com](http://sexworkeropenuniversity.com)) are increasingly developing sexuality education resources aimed at adults. The arguments developed in this thesis could be developed to explore the 'common sense' of 'healthy sexuality' developed in activist communities, such as discussions about consent within BDSM communities (Stryker, 2012). Barker (2012) has noted that the dominant 'rules' of society can often be challenged by the changing practices of groups such as kink and non-monogamous communities. However, she argues that these can end up being replaced by alternative norms and regulatory discourses. A systematic analysis of the discourses of condom use in activist and community spaces could explore potential sites of resistance, reproduction and reworking of dominant norms of sexual negotiations.



## **Longitudinal research**

My research suggests that narratives about sex and condom use can often be fragmentary, both within participants' accounts and over time. The longitudinal aspect of this project certainly shed light on some of the changes that can occur over a short period of time in the way that people make sense of their experiences. A longer timescale for a longitudinal project could enable an analysis of the development of discourses of safer sex over a period of years. In light of the policy focus on adolescents, it would be useful to explore the sexual narratives of a diverse group of people from adolescence through to adulthood. As Henderson and colleagues' (2007) study of youth transitions showed, people's lives develop in complicated ways in relation to the resources available to them and their experiences. For example, Julie's narrative of sexual transformation was constructed from the perspective of someone looking back to a younger self. How might similar narratives be analysed alongside accounts from younger selves, and contrasted with older selves (Terry & Braun, 2009)?

## **Negotiation of condom use as an ongoing, social process**

As I have highlighted, one of the key conclusions of my thesis is that condom use cannot be understood as a one-off, in-the-moment activity. One of the social forms that this process took in some of the female participants' accounts was in relation to their negotiation and decision-making processes about other forms of contraception, such as the contraceptive pill. Using condoms as a primary form of contraception with a regular partner seemed to require a great deal of justification work from participants. During the data analysis phase of my project, I had two experiences in a doctor's surgery and sexual health clinic in which sexual health professionals tried to persuade me to stay on hormonal

contraception, seemingly refusing to believe that I would 'choose' to use condoms. The argument about condom use as a *social* process developed in this thesis could be expanded to explore how these negotiations take place in medical settings. It would be interesting to see any patterns that emerged in justifications given by doctors, nurses and patients in talk about contraceptive choice, how these related to the central themes identified in this thesis and any further themes that might emerge. This could be combined with a more detailed exploration of talk about contraceptive choices with partners, examining other possible forms of social negotiation that people draw on, including talk with friends.

### **Affective practices? Untangling the threads of desire**

The rhetorical discursive approach can bring a great deal to the study of condom use, as I have noted above. However, one of the limitations of my thesis is arguably some of the challenges for this approach in conceptualising the *emotional* and *embodied* aspects of the social construction of condom use, or understanding what Wetherell has termed the 'psychosocial 'texture' (2012, p.2) of my data. Certainly, a discursive approach has enabled me to explore my research questions, in terms of making sense of participants' meaning-making practices when they talked about their experiences of sex and engagements with media representations. However, to develop this argument further I think it would be productive to engage with the relatively recent developments in social psychological and cultural theory around the question of *affect*. Theorising on affect has taken multiple forms, emerging from different theoretical, epistemological and ontological positions. With these approaches come varied definitions of affect, although generally speaking it is a term that relates to notions of embodied emotion and the shifting or 'becoming' nature of social objects and subjects (Wetherell, 2012, pp.2–4). Feminist researchers have developed the use of affect as a concept to make sense of class (Skeggs, 2004b; Wood and Skeggs, 2011;

Walkerdine, 2012), 'race' (Ahmed, 2009) and sexuality (Renold and Ringrose, 2011) and have employed the concept to make sense of empirical data from a psychosocial perspective.

In the 'turn to affect', discourse is sometimes cast as 'old news' (Wetherell, 2012, p.19). However, Wetherell (2012) makes a persuasive case that the analysis of affect requires a theoretical and methodological approach that can understand both embodiment and meaning making. Indeed, she posits that strategies such as those I have employed in this thesis can offer a great deal to the analysis of affect:

Given the sustained critique of discourse theory found in the turn to affect, what is surprising, in fact, is how applicable some of the key concepts of eclectic social psychological discourse analysis (such as interrogating subject positions, dilemmas, moments of trouble, repertoires etc.) remain for analysing affective practice. (Wetherell, 2012, pp.20–21).

Wetherell, building on Walkerdine (for example 2012), offers a new way of conceptualising affect as 'affective practice', to draw on both older social scientific formulations of 'practice' and capture some of the more recent theorising about affect that has sought to understand the dynamic nature of social life (Wetherell, 2012, p.23). The fine-grained approach I have taken in this thesis could be productively combined with a theoretical exploration in particular of the *relational* and *inter-subjective* elements of emotion surrounding sexual negotiations (Wetherell, 2012, pp.24–25). This could perhaps help to further untangle some of the threads of individual, relational and social desire and safer sexual subjectification I discussed earlier in this chapter.

## ***More than a 'healthy choice'***

My thesis has argued that understanding the social construction of condom use requires more than an analysis of individual moments of negotiation during sex. Talk about condom use serves rhetorical purposes in positioning people and communities, categorising relationships and developing norms about sexual practices and gender identities. I have highlighted the ideological patterns of talk about condom use, showing how a detailed exploration of discourse can shed light on the reproduction and resistance of inequalities relating to gender, 'race', sexuality and class. In conceptualising condom use as a social process, I am challenging the rhetoric of sexual health as simply a matter of 'healthy choices' made by rational actors. Indeed, to conceptualise condom use in terms of individual choice obscures much of the messiness of social meaning, interaction and inequality. My research therefore contributes to a much broader political project to turn the light on how dominant discourses of neoliberalism and sexism are sustained and challenged in everyday life.

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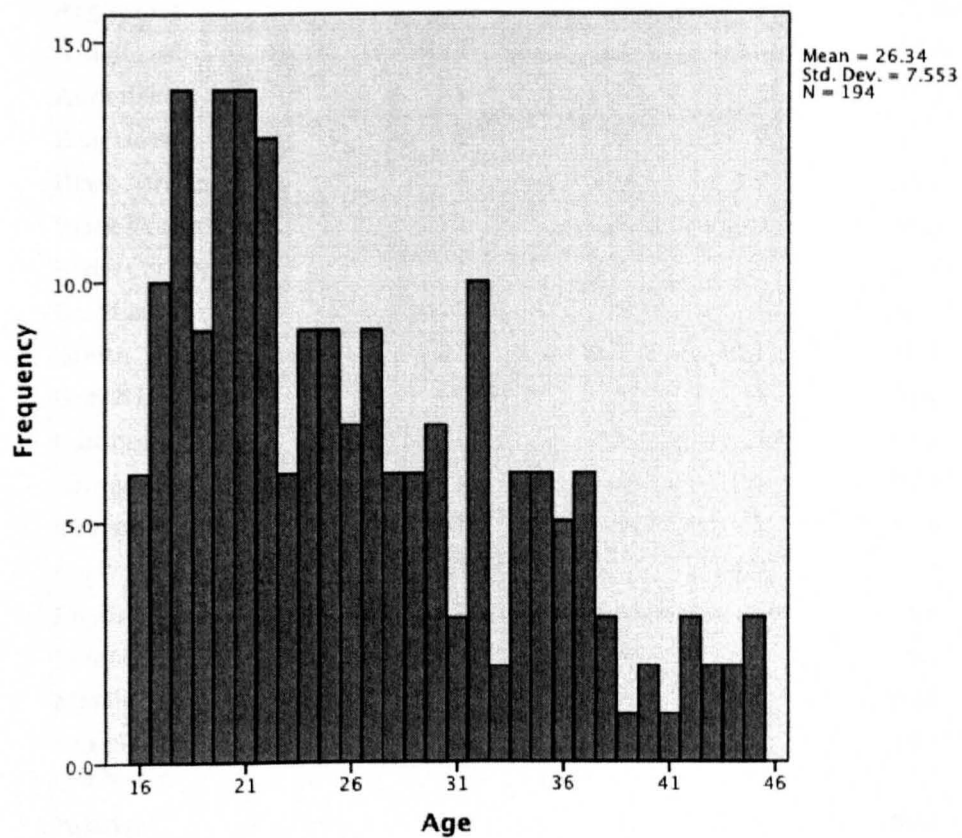
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Appendices

Appendix A: survey participants age distribution





## ***Appendix B: survey participants ethnic origin***

	Frequency	Percent	Valid Percent	Cumulative Percent
No Answer	56	26.4	26.4	26.4
African	3	1.4	1.4	27.8
American	1	.5	.5	28.3
Anglosaxin	1	.5	.5	28.8
Asian	7	3.3	3.3	32.1
Australian	1	.5	.5	32.5
Bangladeshi	2	.9	.9	33.5
Black African	4	1.9	1.9	35.4
Black British	2	.9	.9	36.3
Black Caribbean	3	1.4	1.4	37.7
Brasilian	1	.5	.5	38.2
British	27	12.7	12.7	50.9
British Bangladeshi	1	.5	.5	51.4
Carribean	1	.5	.5	51.9
Caucasian	1	.5	.5	52.4
Chinese	1	.5	.5	52.8
English	10	4.7	4.7	57.5
English Asian	1	.5	.5	58.0
European, non-British	1	.5	.5	58.5
Middle Eastern	1	.5	.5	59.0
Mixed black African and White	1	.5	.5	59.4
Pakistani	2	.9	.9	60.4
South East Asian Malaysian	1	.5	.5	60.8
UK	1	.5	.5	61.3
Welsh	2	.9	.9	62.3
White	8	3.8	3.8	66.0
White British	62	29.2	29.2	95.3
White Canadian	1	.5	.5	95.8
White Caucasian	2	.9	.9	96.7
White Dutch	2	.9	.9	97.6
White English	2	.9	.9	98.6
White European	3	1.4	1.4	100.0
Total	212	100.0	100.0	

## Appendix C: survey participants sexuality and sex Sexuality

	Frequency	Percent	Valid Percent	Cumulative Percent
	3	1.4	1.4	1.4
Bisexual	20	9.4	9.4	10.8
Bisexual, Gay	1	.5	.5	11.3
Bisexual, Queer	1	.5	.5	11.8
Bit of everything	1	.5	.5	12.3
Gay	8	3.8	3.8	16.0
Generally 'open'	1	.5	.5	16.5
Heterosexual	1	.5	.5	17.0
Heterosexual/straight	159	75.0	75.0	92.0
Lesbian	4	1.9	1.9	93.9
Queer	1	.5	.5	94.3
Straight	10	4.7	4.7	99.1
Straight with a sense of humour	1	.5	.5	99.5
Straight, with an odd leaning sometimes	1	.5	.5	100.0
Total	212	100.0	100.0	

## Sex

	Frequency	Percent	Valid Percent	Cumulative Percent
No Answer	4	1.9	1.9	1.9
Female	129	60.8	60.8	62.7
Male	79	37.3	37.3	100.0
Total	212	100.0	100.0	

## **Appendix D: interview participants**

<b>Pseudonym</b>	<b>Location</b>	<b>Age</b>	<b>Sex</b>	<b>Ethnic background</b>	<b>Sexual identification</b>
Abigail	London	Mid 20s	F	White British	Bisexual
Ashley	Oldham	Early 20s	F	White	Heterosexual
Ben	London	Mid 20s	M	White British	Bisexual
Dan	London	Mid 20s	M	White	Gay
Dave	London	Mid 40s	M	Black British	Heterosexual
Debbie	Oldham	Early 30s	F	White	Bisexual
Divya	London	Mid 20s	F	Indian	Heterosexual
Elizabeth	London	Early 30s	F	White British	Heterosexual
Emma	London	Mid 20s	F	White	Bisexual
Hakim	Oldham	Late 20s	M	Middle Eastern	Heterosexual
Jess	London	Mid 20s	F	White British	Heterosexual
Julie	Oldham	Late 30s	F	White British	Bisexual
Katie	London	Early 30s	F	White British	Bisexual
Matt	London	Early 20s	M	White	Heterosexual
Megan	Oldham	Early 20s	F	White	Heterosexual
Najib	Oldham	Early 20s	M	Pakistani	Heterosexual
Natalie	Oldham	Mid 20s	F	White British	Bisexual
Paola	London	Early 20s	F	White European	Heterosexual
Phil	London	Early 40s	M	White British	Heterosexual
Saba	London	Late 20s	F	Indian	Heterosexual
Sam	London	Late 30s	F	White	Bisexual
Sian	London	Late 20s	F	White British	Heterosexual
Simon	Oldham	Mid 40s	M	White	Heterosexual
Sonia	Oldham	Early 40s	F	White English	Heterosexual
Susan	Oldham	Mid 40s	F	White British	Bisexual
Tom	Oldham	Mid 30s	M	White British	Heterosexual

## ***Appendix E: schedule for interview one***

### **Interview schedule**

1. Explain research
2. Confidentiality
3. Interview. Recording. Can stop at any time.

### **TURN ON MIC**

4. Few Qs about self – where live etc
5. Work?
6. Social class
7. Ethnicity
8. Sexuality
9. First sex
10. Info sex - younger
11. Info sex - now
12. Sex in the media – increasing?
13. Condoms in the media – think of any?
14. Condoms – thoughts and feelings
15. Using regularly/where get/carry

### **DIARY.**

1. Explain – experiences and media
2. When write
3. Telling sexual partners
4. Cutouts/format

Have you got any questions?

Info sheet – my contact details. Website

## **Appendix F: information sheet**



### **Turning the light on: condom use in the UK**

#### *Information for participants*

#### **Let's talk about sex.**

*When was the last time you saw a condom in the movies?*

*Do you hide your condoms under the frozen pizza in your trolley?*

*Can you remember the first time you ever saw a condom?*

Have your say in this research, which is taking a peek in the bedrooms of 16-45 year-olds in the UK.

'Turning the light on' is interested in what people in the UK think about condoms. I'd also like to hear your views about sex in film, TV, books and magazines – do you cringe when sex comes on the telly, or do you have shelves packed with books about sex? Do you ever get tips or advice about sex online?

I'm looking for a wide range of people to take part in this research by keeping a private diary for six months to write about your memories, thoughts and experiences of sex (with or without condoms), and what you make of sex in the media.

The research is part of a Ph.D. Project at the Open University, and I hope to publish the findings, which will be useful to future researchers and policy-makers.

We start off with a short questionnaire, then if you think that you'd like to keep a diary, let me know in the box at the end of the questionnaire, so that I can get in touch with you. The information you give about getting in touch will be removed from the questionnaire and kept separately since everything you say or write is confidential. Your name will never be attached to anything you say or write while taking part in the research.

If you want to take part I will get in touch with you to arrange a first meeting, when we will chat about your experiences and memories about sex, and you will be able to ask any questions about the research. At that meeting I'll give you a diary to take away with you and will stay in touch during the project. In the second interview, you will be in charge - using your diary to prompt your memory, you'll talk about your experiences and thoughts of sex and condoms, but you won't be asked to show the diary.

I will also be looking at the media examples that people talk about in their

interview.

There's a website at [www.turningthelight.net](http://www.turningthelight.net), where people can talk about their views on sex in the media, share stories about sex and condoms and find out more about the research.

### **Confidentiality**

Sex can be a very personal matter, so anything you talk about in the interviews will be kept totally confidential, and your anonymity will be assured by giving you a pseudonym, which you can choose for yourself. Sometimes when people agree to take part in research, they later decide they no longer want to do so. If that happens to you, just let us know within three months of your last interview, as this is when the data analysis will be taking place. You can also contact my research supervisor if you need to talk to someone else about the research: Professor Rosalind Gill, Centre for Culture Media and Creative industries, King's College, The Strand, London WC2R 2LS.

Your contact information will only be used to get in touch with you about the research, and will not be given to anyone else.

The interviews will be taking place in central Oldham/London, but if it costs you anything to travel to the interview, I will reimburse you.

I hope that after reading all this, you'll want to take part. If you'd like more information please contact me:

Laura Harvey: [l.harvey@open.ac.uk](mailto:l.harvey@open.ac.uk)

07584 169 322

Department of Psychology, Faculty of Social Sciences, The Open University,  
Walton Hall,

Milton Keynes MK7 6AA

[www.turningthelight.net](http://www.turningthelight.net)

## Appendix G: questionnaire



### Turning the light on

#### Condom use in the UK

##### Questionnaire

Please tick both boxes below

☐ I have read the provided 'Information for participants' sheet and understand the nature of the research.

☐ I am over 16 years of age and agree to participate in this research project.

Age		
Sex	Female	
	Male	
	Other (please specify)	
Ethnic origin		
How would you describe your sexuality?	Bisexual	
	Gay	
	Heterosexual/ straight	
	Lesbian	
	Other (please specify)	
Town/city of residence		
Are you sexually active?	Yes/No (please delete as appropriate)	
Current marital and/or sexual relationship status (e.g. living together, single, single with casual partners, etc)		
Occupation		
Approximate annual household income	£0 - £5,999	
	£6,000 - £15,999	
	£16,000 - £24,999	
	£25,000 - £34,999	
	£35,000 - £49,999	
	£50,000 +	
	Rather not say	

Educational qualifications (e.g. O-levels, CSE, GCSE, A- levels, diploma, apprenticeship, degree, vocational/professional qualifications etc)		
Have you ever used condoms?	Yes	
	No	
Describe how you feel about condoms? (What do you like/dislike about them)		
Describe the first time you saw a condom.		

Please tick which of these factors is important in your decision to use condoms

	Very important to me	Important to me	Not particularly important to me	Not an issue for me (please say why)
Comfort				
Contraception				
HIV/AIDS prevention				
Less messy				
Pleasure				
STI prevention				
Other (please describe)				



Where did you first find information about sex? (e.g. magazines, family planning clinic, friends, parents, books, GUM clinic, online, TV, school). Give as many examples as you like. For each example please state how often you used it to find out initial information about sex.

Information source (please describe, e.g. magazine/book/website name)	Very regularly	Quite regularly	Sometimes	Rarely	Never
Books (please give names)					
Family planning clinic					
Films (please give details)					
Friends					
GUM clinic					
Magazines (please give details)					
Online (please give details)					
Parents					
Sex education at school					
Others (please describe)					

Where do you find information about sex now? (e.g. magazines, family planning clinic, friends, parents, books, GUM clinic, online, TV, school). Give as many examples as you like. For each example please state how often you currently use it to find out information about sex.

Information source (please describe, e.g. magazine/book/website name)	Very regularly	Quite regularly	Sometimes	Rarely	Never
Books (please give names)					
Family planning clinic					
Films (please give details)					
Friends					
GUM clinic					
Magazines (please give details)					
Online (please give details)					
Parents					
Sex education at school					
Others (please describe)					

If you would like to get involved in the diary research, please fill out this section. Contact information will be removed from the questionnaire and kept separately since everything you say or write is confidential. Your name will never be attached to anything you say or write while taking part in the research.

Name	
Telephone	
Address	
Email	

For more information, please contact:

Laura Harvey

[l.harvey@open.ac.uk](mailto:l.harvey@open.ac.uk)

07584 169 322

Department of Psychology

Faculty of Social Sciences

The Open University

Walton Hall

Milton Keynes

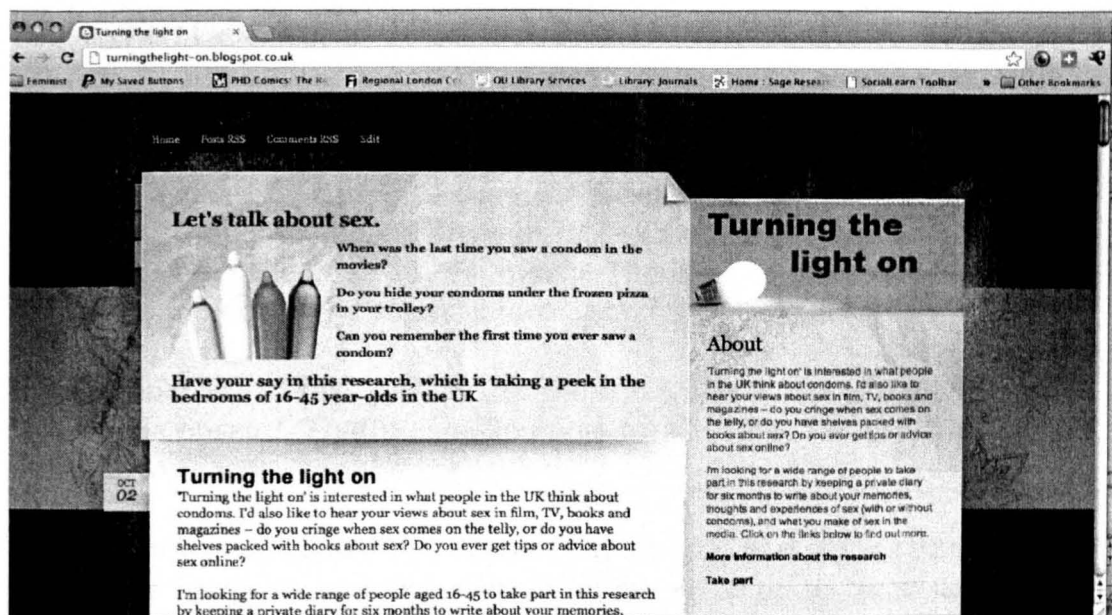
MK7 6AA

[www.turningthelighton.net](http://www.turningthelighton.net)

## Appendix H: research blog

[www.turningthelighton.net](http://www.turningthelighton.net)

Screen shot:



**Appendix I: consent form**

'Turning the light on': condom use in the UK

*'Informed consent' form*

Researcher: Laura Harvey, Open University

'Turning the light on' is interested in what men and women in the UK think about condoms. I'm looking for a wide range of people to take part in this research by keeping a private diary for six months to write about your memories, thoughts and experiences of sex (with or without condoms), and what you make of sex in the media. There's lots more information about the project in the sheet 'information for participants'.

If you would like to take part in this project, you will need to give your 'informed consent'. That means you understand what the project is about, and that you agree to take part.

Even when you've signed this statement, you can still decide not to take part in the research, you just need to let me know up to three months after your last interview.

- 4. I have read the provided 'Information for participants' sheet and understand the nature of the research.
- 5. I understand that after the research has begun, I may decide not to take part, up to three months after my last interview.
- 6. I am over 16 years of age and agree to participate in this research project.

Signature\_\_\_\_\_ Date\_\_\_\_\_

Print name\_\_\_\_\_

## Appendix J: poster

**Let's talk about sex.**



*When was the last time you saw a condom in the movies?*

*Do you cringe when sex comes on the telly, or pick up top tips from magazines?*

*Can you remember the first time you ever saw a condom?*

Have your say in this research, which is taking a peek in the bedrooms of 16-45 year-olds in the UK, to find out what you think about condoms and sex in the media.

Find out more at [www.turningthelighton.net](http://www.turningthelighton.net)



## ***Appendix K: transcription conventions***

(.) A pause that is hearable but too short to assign a time to.

(2.0) The length of a pause or gap, in seconds.

[overlap] Square brackets indicate the onset and end of overlapping speech.

°quiet° Degree signs enclose speech that is noticeably quieter than the surrounding talk.

Rea::lly Colons mark elongation of the prior sound.

LOUD Capitals mark talk that is noticeably louder than the surrounding speech.

Underline Underlining marks speaker emphasis.

= An equals sign indicates immediate latching of successive talk.

(Brackets) Single brackets enclose the transcribe's best guess (stars in brackets indicate talk that is unclear on the tape\*\*\*\*)

((Double brackets enclose comments from the transcriber))

.hhh A dot before an h or series of h's indicates an inbreath

hh An h or series of h's marks an out-breath

? A question mark indicates a rising inflection

- A dash marks a sharp cut-off of a word or sound

Adapted from conventions used widely for conversation analysis (Speer, 2005, p.199).